M11000005567

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |

B. KOHR

NOV-4 2011

EXAMINER



200213098672

DEFANTMENT OF STATE MYTISION OF CURPORATIONS TALLAHASSEE FLORIDA RECEIVED

11 NOV -4 PM 2: 57



ACCOUNT NO. : I2000000195

REFERENCE : 968812

7543726

AUTHORIZATION _

| CO | or namar (| , \$125.00 | |
|----|------------|------------|--|
| | | | |

ORDER DATE: November 4, 2011

ORDER TIME : 9:43 AM

ORDER NO. : 968812-030

CUSTOMER NO: 7543726

FOREIGN FILINGS

NAME: GAINESVILLE 2011, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LARGE BY COMPANY TO TRANSACT BY SINCESS IN THE STATE OF FLORIDA:

| LIMITED LIABILITY COMPANY TO TRANSACT BUS | INESS IN THE STATE OF FLORIDA: |
|---|---|
| Gainesville 2011, LLC | |
| (Name of Forcign Limited Liability Compa | ny; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| (If name unavailable, enter alternate name adopted consent of the managers or managing members add Company," "L.L.C," "LLC.") | for the purpose of transacting business in Florida and attach a copy of the writte opting the alternate name. The alternate name must include "Limited Liability |
| 2 Delawarc | ited liability (FEI number, if applicable) |
| (Jurisdiction under the law of which foreign lim company is organized) | ited liability (FEI number, if applicable) |
| 1 October 21, 2011 | 5. Perpetual |
| 4. October 21, 2011 (Date of Organization) | (Duration: Year limited liability company will cease to exist or "perpetual") |
| Upon qualification | |
| (Date first transacted) | business in Florida, if prior to registration.) & 608.502 F.S. to determine penalty liability) |
| 7. 15 Maple Street | |
| Morristown, NJ 07960 | |
| (S | treet Address of Principal Office) |
| 8. If limited liability company is a manage | er-managed company, check here |
| 9 The name and usual business addresses | of the managing members or managers are as follows: |
| | |
| HUH US Real Estate Income REIT In | C. |
| 15 Maple Street | |
| Morristown, NJ 07960 | |
| | more than 90 days old, duly authenticated by the official having custody of records in I. (A photocopy is not acceptable. If the certificate is in a foreign language, a or must be submitted.) |
| 11. Nature of business or purposes to be o | conducted or promoted in Florida: |
| Own, operate and lease real property an | d any and all lawful business. |
| | |
| Signature of a mem | ber or an authorized representative of a member. |
| |), F.S., the execution of this document constitutes an affirmation under the |
| penalties of perjury that the facts state document to the Department of Si | ed herein are true. I am aware that any false information submitted in a late constitutes a third degree felony as provided for in s.817.155, F.S.) |
| | Authorized Representative |
| Type | ed or printed name of signee |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| lf unavailab | le, the alternate to be used in th | ne state of Florida is: | |
|--------------|------------------------------------|---|--|
| | | | |
| . The nam | e and the Florida street address | s of the registered agent and office are: | |
| , | Corporation Service Comp | any | |
| | | (Name) | |
| | 1201 Hays Street | | |
| | Florida Street Ad | dress (P.O. Box NOT ACCEPTABLE) | |
| | Tallahassee | FL 32301 | |
| | | City/State/Zip | |

ed relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608. Florida Statutes. Corporation Service Company

Kimberly B. Moret as its agent

\$ 100.00 Filing Fee for Application

Designation of Registered Agent \$ 25.00

Certified Copy (optional) \$ 30.00

Certificate of Status (optional) · 5.00

Delaware

PAGE 3

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GAINESVILLE 2011, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FOURTH DAY OF NOVEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GAINESVILLE 2011, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5055446 8300

111166510

AUTHENT CATION: 9136251

DATE: 11-04-11

You may verify this certificate online at corp.delaware.gov/authver.shtml