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Foreign Limited Liability Company SST1 790 Monument RD, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

D. BRUCE

DEC 0 6 2011

EXAMINER

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

TIMITED LIABILIT	YCOMPANYTOTRAI	VSACT BUSINESS IN	ТΗЕ	STATE OF FLORIDA:	11125 10 1008/112():	0144077
1. SSTI 790 Mon			·			_
(Name of I	foreign Limited Liabi	lity Company; must	inclu	le "Limited Liability Company,"	' "L.L.C.," or "LLC.")	
(If name unavailable consent of the mail Company," "L.L.C	nagers or managing m	ne adopted for the p embers adopting the	urpos alter	o of transacting business in Flori nate name. The alternate name m	da and attach a copy of th nust include "Limited Lial	e written pility
2. Delaware			_ 3.	<u> </u>		
(Jurisdiction un company is orga	der the law of which is anized)	foreign limited liabil	ity	(PEI number, if	applicable)	
4. November 28,	2011		5.	Perpetual	12	
(Date of Organization			(Duration: Year limited liable exist or "perpetual")	lity company will cease to	8
6	(Dist- 0-4)		- का	Da Barra to male and	<u></u>	_ [.
	(See sections	608.501 & 608.502	F.S.	da, if prior to registration.) o determine penalty liability)	SE	ଧ
7. 111 Corporate	Dr., Suite 120				<u></u>	
Ladera Ranch	CA	92694		,		ထံ
Diniora Adren	<u> </u>		ress o	f Principal Office)	<u></u>	
		•	_	ompany, check here 🔀 ging members or managers	are as follows:	
Strategie Store	age Trust, Inc. (Manag	er) - 111 Corporate	Dr., S	uite 120, Ladera Ranch, CA 926	594	<u>.</u>
	•					
hejuristiction und translation of the ce	ler the law of which it is stificate under oath of t	aganized. (A photo he translator must be	ocopy subm	ys old, only authenticated by the cismot acceptable. If the certificate sted.) promoted in Florida: Own s	is in a foreign language, a	
			1	1)		⁴
•	<u> </u>	Jank 1	h	What-		
				orized representative of a		
	malties of perjury that the scument to the Depart	e facts stated herein a	re true tutes i	ion of this document constitutes an I am aware that any false inform third dogree felony as provided	nation submitted in a	

Typed 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.

If unavailable, the alternate to be used in the state of Florida is: 2. The name and the Florida street address of the registered agent and office are: CT Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation Fl. 33324 City/State//ip Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes 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. CT Corporation System By:	SST1 79	00 Monument Rd, LLC			
CT Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation Fl. 33324 City/State//.ip Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the abligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. ET Corporation System	If unavaila	ble, the alternate to be use	ed in the state of Florida is:		
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) For Street Address (P.O. Box NOT ACC	2. The name	ne and the Florida street ac	ddress of the registered agent and office a	are:	٠
Plantation Plantation Florida Street Address (P.O. Box NOT ACCEPTABLE) City/State/Zip Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the abligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. Florida Street Address (P.O. Box NOT ACCEPTABLE)		C T Corporation System	•		
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6	liability con agent and a relating to t	npany at the place designating the proper and complete per of my position as registered for the properties of the proper	ted in this certificate, I hereby accept the a I further agree to comply with the provis- rformance of my duties, and I am familiar d agent as provided for in Chapter 608, Fl n System	ppointment as register ions of all statutes with and accept the	ed
(Signature)			(Signature)		

\$ 25.00

\$ 30.00 \$ 5.00 Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SSTI 790 MONUMENT RD, 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 SECOND DAY OF DECEMBER, A.D. 2011.

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

5071334 8300

111233442

may verify this certificate coline

Joffrey W. Bullock, Secretary of State

UTHENTYCATION: 9196203

DATE: 12-02-11