M12000001622

(Requestor's Name)
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2002
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100224048331

TALLAHASSEE, FLORIDA

RECEIVED

FILED SECRETARY OF STATE DIVISION OF CORPORATION

MAR 2 2 2012) T. HAMPTON



ACCOUNT NO. : I2000000195 REFERENCE: 125085 167868A AUTHORIZATION COST LIMIT ORDER DATE: March 9, 2012 ORDER TIME: 11:43 AM ORDER NO. : 125085-015 CUSTOMER NO: 167868A FOREIGN FILINGS NAME: REDUS IMAGINE, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Stephanie Milnes -- EXT# 2920 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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: REDUS IMAGINE, LLC (Name of Poreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 5. Perpetual 4 12/21/2009 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 301 South College Street Charlotte, NC 28288-0630 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: RBDUS Properties, Inc., Member 301 South College Street, Charlotte, NC 28288-0630 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: hold OREO properties Signature of a member or an authorized representative of a member, (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Daniel Bartok, President

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.

1. The name of the Limited Liability Con	npany is:	
REDUS Imagine, LLC		
If unavailable, the alternate to be used in t	he state of Florida is:	
The name and the Florida street addres	s of the registered agent and office are:	
Corporation Service Comp	pany	
	(Name)	
1201 Hays Street		
Florida Street Ad	ddress (P.O. Box NOT ACCEPTABLE)	
Tallahassee	FL 32301	
	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 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.

Corporation Service Company

Q2 Stephanie K. Milnes
Assistant Vice President
Filing Fee for Application
Designation of Registered Agent
Certified Copy (optional)
Certificate of Status (optional)

SECRETARY OF STATE STATE OF CORPORATIONS

12 MAR 21 AM 9: 30

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "REDUS IMAGINE, 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 TWELFTH DAY OF MARCH, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REDUS IMAGINE, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4767483 8300

120300456

Jeffrey W Bullock, Secretary of State AUTHENTY CATION: 9424380

DATE: 03-12-12

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