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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

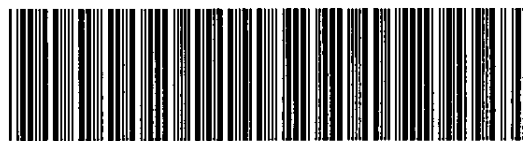
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DIVISION OF CORPORATIONS
12 MAY -4 PM 4:18

Melanie J. Wright
email mjwright@kptlaw.com

KIRK PALMER & THIGPEN, P.A.

ATTORNEYS AT LAW
1300 BAXTER STREET
SUITE 300
CHARLOTTE, NORTH CAROLINA 28204
TELEPHONE (704) 332-8000
FACSIMILE (704) 332-8264

May 1, 2012

VIA FEDERAL EXPRESS

Registration Section
State of Florida
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Application for Authorization to Transact Business in Florida for
Turner Family Investments, LLC

Ladies and Gentlemen:

On behalf of Turner Family Investments, LLC (the "LLC"), please find enclosed herewith an executed original and one conformed copy of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, together with a Certificate of Existence authenticated by the North Carolina Secretary of State and the Certificate of Designation of Registered Agent/Registered Office. Also enclosed is our firm's check for \$160.00 in payment of the required \$100 filing fee, \$30 Certified Copy fee, \$5 Certificate of Status fee and \$25 Designation of Registered Agent fee.

Please file the enclosed Application upon your receipt of this letter and return evidence of the filing to me at my address listed above in the return Federal Express envelope enclosed for that purpose. Thank you for your cooperation.

Very truly yours,



Melanie J. Wright
For the Firm

MJW:kts

Enclosures

cc: Ron L. Turner, Jr. (via e-mail)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY -4 PM 4:18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Turner Family Investments, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Melanie J. Wright

Name of Person

Kirk Palmer & Thigpen, P.A.

Firm/Company

1300 Baxter Street, Suite 300

Address

Charlotte, NC 28204

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melanie J. Wright at (704) 332-8000
Name of Person Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY 2001 PM 4:18

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:

1. Turner Family Investments, LLC

(Name of Foreign 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 Florida 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. North Carolina

(Jurisdiction under the law of which foreign limited liability company is organized)

3. Not applicable

(FEI number, if applicable)

4. February 7, 2006

(Date of Organization)

5. perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 568 Jetton Street, Suite 200

Davidson, NC 28036

(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:

Ron L. Turner, Jr., Manager

568 Jetton Street, Suite 200

Davidson, NC 28036

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 oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: real estate investments and leasing


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.)

Ron L. Turner, Jr., Member/Manager

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.

1. The name of the Limited Liability Company is:

Turner Family Investments, LLC

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:

NRAI Services, Inc.

(Name)

515 East Park Avenue

Florida Street Address (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.

NRAI Services, Inc.

by: Lindsey Hernandez

(Signature)

Lindsey Hernandez/Assistant Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)



NORTH CAROLINA

Department of the Secretary of State

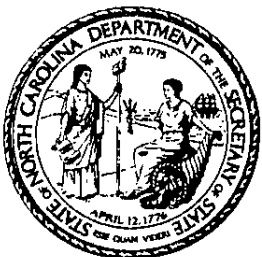
CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

TURNER FAMILY INVESTMENTS, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 7th day of February, 2006, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 17th day of April, 2012.

Elaine F. Marshall

Secretary of State