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Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

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Foreign Limited Liability Company TRH-FL 2012-1, LLC

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MAY 25 2012

5/24/2012

CT CORPORATION



COVER LETTER

HECT: TRI	I-FL 2012-I, LLC		
	Name of Limited Liability Company		
	plication by Foreign Limited Liability Company for Authorization to Transact Business in Floric sok are submitted to register the above referenced foreign limited liability company to transact be		
se return all d	orrespondence concerning this matter to the following:		,
	Marita Clarke		
_	Name of Person	_	
<u>1</u>	ce Miller LLP	_	
_	Firm/Company	_	
(ne American Square, Suita 2900		
-	Addross	-	7
1	adianapolis, IN 48282-0200	Tall Control	HAY 24
	City/State and Zip Code		-
a	arita,clarke@icomiller.com	41	PM 12: 26
	E-mail address: (to be used for future annual report notification)	- Ca	₩ं इं
urther inform	tion concerning this matter, please call:		8
Marite Cl	rke at (317) 236-5847		•
	Name of Person Area Code & Daytime Telephone Number	· -	•
Division of Registration P.O. Box			
osed is a ch \$125.00 F	cck for the following amount: ling Fee		

PLOS? - 10/05/2010 C T System Custom

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

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

1.	TRH-FL 2012-1, LLC (Name of Foreign Limited Liability Company; must in		,	.")	
CO	f name unavailable, onter alternate name adopted for the pur usent of the managers or managing members adopting the a empany," "L.L.C," "LLC.")				
2.	Delaware	3.	45-5338648		
	(Jurisdiction under the law of which foreign limited liability company is organized)	<i>y</i>	(FEI number, if applicable)		
4.	5/23/2012	5.	Perpetual		
	(Dute of Organization)		(Duration: Year limited liability company will occurs or "perpetual")	ase to	
6.	upon filing				
	(Date first transacted business in (See sections 608.501 & 608.502 F.	Plon S. to	da, if prior to registration.) o determine penalty liability)		12
7.	5215 N. O'Comor Blvd., Suite 200, Irving, TX 75039			,	A
				A Land	
	(Street Addres	u of	Principal Office)		47
_	**************************************			(1) (E)	0
8.	If limited liability company is a manager-manage	a o	ompany, eneck here		PH 12:
9.	The name and usual business addresses of the ma	nag	ing members or managers are as follows:		: 26
	5215 N. O'Connor Blvd., Suite 200, Irving, TX 75039			320	
	Attached is an original certificate of existence, no more than 90				sin,
	iurisdiction under the law of which it is organized. (A photoco			85° 6	
uari	slation of the certificate under coth of the translator must be suit	ALI DELJA	s. 1)		
11.	Nature of business or purposes to be conducted of	e p	romoted in Florida:		
J	Real Estate Holding Company				
-	MRL			 ,	
	Signature of a member or an au	ıtho	orized representative of a member.		
	• • • • • • • • • • • • • • • • • • • •		n of this document constitutes an affirmation under the		
			am aware that any false information submitted in a hird degree felony as provided for in s.817.155, F.S.		
	Max Kumhi			••	
	Typed or printed	i na	me of signee		

#12157 • 10/03/2010 GT \$790se Gullo

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.

TRH-FL 2012-1, I	the Limited Liability	,
If unavailable, th	he alternate to be use	d in the state of Florida is:
2. The name and	d the Florida street a	ddress of the registered agent and office are:
(C T Corporation System	
	C T Corporation System	(Namo)
	C T Corporation System 1200 South Pine Island R	, ,
	1200 South Pine Island R	, ,
1	1200 South Pine Island R	cond

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.

By: James Halpin

(Signature) 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)

PLUST - 10/03/2010 C 7 System Online

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRH-FL 2012-1, 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 TWENTY-FOURTH DAY OF MAY, A.D. 2012.

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

5158840

120625186

jeffrey W. Buillock, Secretary of State TION: 9595071

DATE: 05-24-12