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(Re	equestor's Name)
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PICK-UP	☐ WAIT ☐ MAIL
	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

2812 JUN 19 AM 9: 32

DEPARTMENT OF STATE

J. SAULSBERRY EXAMINER

JUN 20 2012



XX PLAIN STAMPED COPY

CORPORATION SERVICE COMPANY

	ACCOUNT NO.	:	I2000000	0195		
	REFERENCE	:	232651	4368595		
	AUTHORIZATION	:	Smell &	Cenan	,	
	COST LIMIT	:	\$ \$\int_{125/00}\$			
ORDER DATE :	June 7, 2012					
ORDER TIME :	4:10 PM					
ORDER NO. :	232651-145					
CUSTOMER NO:	4368595					
	FOREIGN F	 ILI	<u>ngs</u>	- 	1A3	-
NAME:	UB (TA-TALLAH) LLC	ASS	EE) LESSEI	Ξ,	BIZ JUH 19 AM	i i
XXXX QUALIFIC	CATION (TYPE: L)	ក្)			4 9:32 STATE CORIDA	**************************************

CONTACT PERSON: Stephanie Milnes -- EXT# 2920 EXAMINER:

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

COVER LETTER

SUBJECT: UE	3 (TA-Tallahassee) Lessee,	LLC	
	1	Name of Limited Liability Company	_
		iability Company for Authorization to Transact Business e above referenced foreign limited liability company to to	
Please return all	correspondence concerning this	matter to the following:	
	١		
	·	Name of Person	
		Firm/Company	
			5
		Address	ריאן היבניות בריאן
			HIN 19
		City/State and Zip Code	E.F.S
_	E-mail address	: (to be used for future annual report notification)	
For further inform	nation concerning this matter, pl	lease calf:	<i>5. N</i>
	Name of Person	at () Area Code & Daytime Telephone Number	
	NG ADDRESS: of Corporations	STREET ADDRESS: Division of Corporations	
Registrat	tion Section	Registration Section	
P.O. Box Taliahass	x 6327 see, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	heck for the following amount filing Fee \$\int_{\text{S130.00}}\$ Filing Certificate of \$\text{S}\$	Fee & \$155.00 Filing Fee & \$160.00 Filing Fe	

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. UB (TA-Tallahassee) Lessee, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L	
(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 consent of the managers or managing members adopting the alternate name. The alternate name must Company," "L.L.C," "LLC.")	and attach a copy of the written t include "Limited Liability
2. Delaware 3.	
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if approximately	plicable)
4. 06/07/2012 5. perpetual	-
(Date of Organization) (Duration: Year limited liability exist or "perpetual")	company will cease to
6.	.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	SECH
7. 2340 River Road, Suite 310, Des Plaines, IL 60018	
	19 SSEE
(Street Address of Principal Office)	7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
8. If limited liability company is a manager-managed company, check here	9:3 STATE SRID
9. The name and usual business addresses of the managing members or managers ar	> N
UB Holding Company, LLC, 2340 River Road, Suite 310, Des Plaines, IL 60018	3
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offic	pial basing auctody of mounts in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in	
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:	
To own, lease, and operate real properties.	
When y h	
Signature of a member or an authorized representative of a me	ember.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affi	
penalties of perjury that the facts stated herein are true. I am aware that any false informat document to the Department of State constitutes a third degree felony as provided fo	
Michael W. Brennan, Authorized Representative	,

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.

I. The name of the Limited Liability C UB (TA-Tallahassee) Lessee, LLC	Company is:	
If unavailable, the alternate to be used i	n the state of Florida is:	
2. The name and the Florida street add	ress of the registered agent and office are:	3
Corporation Service Co	ompany (Name)	PALL AHASSE
1201 Hays Street		IN IS
Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee	FL 32301	ORATE OF S
	City/State/Zip	THE W

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

By: Stephanie Milnes Asst. V. F.

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

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "UB (TA-TALLAHASSEE) LESSEE, 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 ELEVENTH DAY OF JUNE, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UB (TA-TALLAHASSEE) LESSEE, LLC" WAS FORMED ON THE SEVENTH DAY OF JUNE, A.D. 2012.

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

THE ED

5166413 8300

120722260

AUTHENTY CATION: 9631593

DATE: 06-11-12

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