The the fax audit number ase print this page and use it as a cover sheet. (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

Prom:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:		

Foreign Limited Liability Company LSREF2 CLOVER PROPERTY 18, LLC

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COVER LETTER

ECT:	Name of Limited Liability Company	
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enciosed "Application by Foreign Limite ence, and check are submitted to register	d Liability Company for Authorization to Transact Business in Florida," C r the above referenced foreign limited liability company to transact busines	ss in I
se return all correspondence concerning t	his matter to the following:	
Dianna H. Heise		₹
	Name of Person	4
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c/o Hudson Advisors LLC		`ε
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	tu sees	
2711 N. Haskell Avenue, St	11te 1800	
	Address	
Dollar Tayer 75704		
Dallas, Texas 75204	Dallas, Texas 75204	
	City/State and Zip Code	
diheise@hudson-advisors.co	m	
E-mail add	ress: (to be used for future annual report notification)	
further information concerning this matte	r please call.	
imino monaton concerning and many	1 bronse and	
Dianna H. Heise	214 754-8400	
Name of Person	Area Code & Daytime Telephone Number	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
Registration Section P.O. Box 6327	Registration Section	
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
	Tallahassee, FL 32301	

08\53\5015 01:5\ 8626336092 CT CORPORATION

PAGE 02/05

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 LABILITY COMPANYTO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

LL	MITED FIVERIETLY COMPAINT TO LIVENDACT BOSINESS IN THE P	ŲL	ALE OF PLOKIDA:	
1.	LSREF2 Clover Property 18, LLC (Name of Foreign Limited Liability Company; must include	de '	"Limited Liability Company," "L.L.C.," or "LLC	.")
CO	name unavailable, enter alternate name adopted for the purpos nsent of the managers or managing members adopting the alter ompany," "L.L.C," "LLC.")	se c	of transacting business in Florida and attach a cop te name. The alternate name must include "Limite	d Liability
2	Delaware 3,	t		冷
	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)	12 NB 23 H 7: 53
4.	2/16/2012 5.	. 1	Perpertual	73 6
••	(Date of Organization)	-	(Duration: Year limited liability company will consist or "perpetual")	ease to
6	upon filing			بب
٥.	(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.	orid to	a, if prior to registration.) determine penalty liability)	ن
7.	2711 N. Haskell Avenue, Suite 1700		<u> </u>	
	Dallas, TX 75204			
	(Street Address of	of I	rincipal Office)	·
8.	If limited liability company is a manager-managed of	co	mpany, check here 🔀	
9.	The name and usual business addresses of the mana	agi	ng members or managers are as follows:	
	LSREF2 Clover Sub Property, LLC			
	2711 N. Haskell Avenue, Suite 1700			
	Dalias, Texas 75204			
the	Attached is an original certificate of existence, no more than 90 days jurisdiction under the law of which it is organized. (A photocopy relation of the certificate under cath of the translator must be subm	y i s i	not acceptable. If the certificate is in a foreign langu	
11	. Nature of business or purposes to be conducted or	pr	omoted in Florida:	
	Real Estates Investments			
	Signature of a member or an auti	Ro:	rized/representative of a member.	
	(In accordance with section 608.408(3), P.S., the execut penalties of perjury that the facts stated herein are true document to the Department of State constitutes a Marc L. Lipshy Vice President of LSRI	ition a. I a th	n of this document constitutes an affirmation under the am aware that any false information aubmitted in aird degree felony as provided for in s.817.155, F.	a

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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	e of the Limited Liability	y Company is:
LSREF2 Clov	ver Property 18, LLC	
If unavailab	le, the alternate to be use	ed in the state of Florida is:
2. The name	e and the Florida street a	address of the registered agent and office are:
	C T Corporation System	
		(Name)
	1200 South Pine Island R	Road
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324
		City/State/Zip
liability comp agent and ag relating to th	pany at the place designal free to act in this capacity te proper and complete pe of my position as registere CT Corporation	_
	By: Condi	Connie Bryan Assistant Secretary
		· · · · · · · · · · · · · · · · · · ·
		100.00 Filing Fee for Application 25.00 Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00 \$ 5.00

Delaware

PAGE 1

The First State

I, JEFFREY N. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LSREF2 CLOVER PROPERTY 18, 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-SECOND DAY OF AUGUST, A.D.
2012.

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

5110933 8300

120962302

You may werify this certificate online at corp. delawere.gov/authver.shtml

AUTHENTICATION: 9798409

DATE: 08-22-12

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