Page 1 of 1

Division of Corporations Electronic Filing Cover Sheet

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(((H120002877193)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878~5368

\*\*Enter the email address for this business entity to be used for fulfulie annual report mailings. Enter only one email address please. \*\* > 5 Email Address:

Foreign Limited Liability Company

Certificate of Status	. 0	
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Page Count	05	
Estimated Charge	\$125.00	

Cole WM Tallahassee FL, LLC

Electronic Filing Menu

Corporate Filing Menu

J. BRYAN

DEC 1 0 2012

https://efile.sunbiz.org/scripts/efilcovr.exe

CT CORPORATION

#### **COVER LETTER**

Division of Corporations  SUBJECT: Cole WM Tallahassee FL, LLC  Name of Limited Liability Company  The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Carolinate of Lixistence, 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:	,			
SUBJECT: Cole WM Tallahassee FL, LLC				
Name of Limited Liability Company				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Carolicate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.				
lease return all correspondence concerning this matter to the following:				
Jennifer Wittmann				
Name of Person				
7. <del></del>				
Cole Real Estate Investments				
Firm/Company				
2325 E. Camelback Road Suite 1100				
Address				
Phoenix, AZ 85016				
City/State and Zip Code				
jwittmann@colecapital.com				
E-mail address: (to be used for future annual report notification)				
or further information concerning this matter, please call:				
<u>Jennifer Wittmann</u> at (602 ) 778-6352				
Name of Person Area Code & Daytime Telephone Number				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building Tallahassee, FL 32301				
nclosed is a check for the following amount:  \$\int_{\text{S125.00 Filing Fee}}^{\text{S130.00 Filing Fee}} \int_{\text{Certificate}}^{\text{S155.00 Filing Fee}} \int_{\text{Certified Copy}}^{\text{S160.00 Filing Fee}} \in				

## 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 Cole WM Tallahassee FL, LLC				
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.C.")				
(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. Delaware  (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)				
4. November 29, 2012  (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. 2325 E. Camelback Road Suite 1100				
Phoenix, AZ 85016				
(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:				
Cole REIT Advisors IV, LLC				
2325 E. Camelback Road Suite 1100				
Phoenix, AZ 85016				
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 lauguage, a translation of the certificate under oath of the translation must be submitted.)				
11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful business or				
activity under the laws of this State				
<u></u>				
Signature of a member or an authorized representative of a member.				
(In accordance with section 608.408(3), P.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, P.S.)				
Todd J. Welss, Senior Vice President of Cole REIT Advisors IV, LLC, its Manager				

72/07/2012 16:09 865635092

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.

The same of the Limited Linbility Company in

1. The name of the Limited Clabbing Company is.	
Cole WM Tallahassee FL, LLC	
If unavailable, the alternate to be used in the state of	Florida is:
2. The name and the Florida street address of the reg	istered agent and office are:
CT Corporation System	ORALL O
(Name	<del>)</del>
1200 South Pine Island Road	<u></u>
Florida Street Address (P.O. I	BOX NOT ACCEPTABLE)
	т <u>.</u> 33324
City/St	ate/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.

Connie Bryan

Connie Bryan

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)

# Delaware

PAGE :

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "COLE WM TALLAHASSEE FL, 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 THIRD DAY OF DECEMBER, A.D. 2012.

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

5249721 8300

121276568

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

AUTHENTICATION: 0030078

DATE: 12-03-12

Z609889998 60:9I ZI0Z/L0/ZI