Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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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

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Foreign Limited Liability Company ARCP RL Portfolio IX, LLC

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Corporate Filing Menu

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7/16/2014

W monther ill 1 1/2016

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ARCP RL Portfolio IX, LLC	
Name	e of Limited Liability Computy
	ility Compuny for Authorization to Transact Business in Florida," Certificate cave referenced foreign limited liability company to transact business in Flori
Please return all correspondence concerning this man	ner to the following:
Jennifer Wittmann	
	Name of Person
American Realty Capital Propertie	s, Inc.
	Firm/Company
2325 E. Camelback Road, Suite 11	00
	Address
Phoenix, AZ 85016	
	City/State and Zip Codo
jwittmann@arcpreit.com	
E-mail address:	(to be used for future ennual report notification)
For further information concerning this matter, please	se call:
Jennifer Wittmann	at (602) 778-6352
Name of Contact Person	Ares 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 Buildung 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amou	
Certificate of	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ARCP RL Portfolio IX, LLC (Name of Poreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or	5075M
(restile of roteign estimated establish Company), titlish thatable command company, company, or	
(If name unstallable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate nar Liability Company," "LLC," or "LLC.")	ne must include "Limited
2. Delaware 3	
[Jurisdiction under the law of which foreign limited liability (FEI number, if applicat company is organized)	ble)
4	
(Unte first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	ALC: SEC
5. American Realty Capital Properties, Inc.	2
2325 E. Camelback Road, Suite 1100, Phoenix, AZ 85016	<u>%</u> 5
(Street Address of Principal Office)	FF 9 _
6. American Realty Capital Properties, Inc.	
2325 E. Camelback Road, Suite 1100, Phoenix, AZ 85016	993
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to ma Cole REIT Advisors III, LLC, Manager, 2325 E. Camelback Road, Suite 1100, Phoenix AZ 85016	inage 19/are:
8. Attached is an original certificate of existence, no more than 90 days old, duly authent having custody of records in the jurisdiction under the law of which it is organized. (A placeptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	hotocopy is not
	_
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of parjury tem aware that any false information submitted in a document to the Department of State constitutes a third degree feloxy as provided	that the florts stated herein are true. I d for in s.\$17.155, F.S.)
Todd J. Weiss, Authorized Person of Cole REIT Advisors III, LLC, Its Manage	er
Typed or printed name of signee its Manager	-

1. The name of the Limited Liability Company is:

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable, the alternate to be used in the state of Florida is:						
. The nam	e and the Florida street addr	ress of the registered agent and office are:	Z			
	C T Corporation System		を対			
		(Name)				
	1200 South Pine Island Ros	ad				
	Plorida Stree	et Address (P.O. Box NOT ACCEPTABLE)	元 93			
	Plantation	FL 33324	章 r			
		City/State/Zip	للمجتشم			
	npany at the place designated	and to accept service of process for the above so d in this vertificate, I hereby accept the appoints capacity. I further agree to comply with the pro	nent as			
egistered a tatutes rela accept the o	iting to the proper and compl bligations of my position as i	olete performance of my duties, and I am familiate registered agent as provided for in Chapter 605 James M. Assistant Se	r with and 5, Florida Halpin			
registered a statutes rela	iting to the proper and compl ibligations of my position as i C T Corporation System By:	registered agent as provided for in Chapter 605 James M. Assistant Se	r with and 5, Florida Halpin			

Certified Copy (optional)

S 5.00 Certificate of Status (optional)

\$ 30.00

Delaware

PACE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARCP RL PORTFOLIO IX, 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 JULY, A.D. 2014.

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

5542619 8300

140947280

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

Jeffray W. Bullock, Secretary of State

DATE: 07-11-14