Division of Corporations Electronic Filing Cover Sheet

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Foreign Limited Liability Company LSREF3/AH Chicago, LLC

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Corporate Filing Menu

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COVER LETTER

	tration Section ion of Corporation	ts					
SUBJECT:	.SREF3/AH Chica	go, LLC					
		Name of L	imited Linbili	y Company			
The enclosed " Existence, and	Application by For check are submitte	eign Limited Liability d to register the above	Company for referenced for	Authorization t relgn limited lia	to Transact ability com	Business in Florida," Co pany to transact business	rtificate of in Florida
Please return a	II correspondence o	onceming this matter t	o the followin	ıg:			
	Teresa DeSimor	le					
			Name of Pe	rson			
	Hudson Advisor	's I.LC					
			Firm/Comp	any		₩. 20.5¥	20
	2711 N. Haskell	, Suite 1800					2014 OCT -9 MM \$9: 22
			Addres			表面	``
	Dallas, Texas 7					かれて	-9
		C	City/State and A	lip Code		ران الله دران الله	
	tdesimone@huds					윤점	igo .
		l;-mail address; (to be	e used for futu	e annual report n	notification)	17 C	12
For further info	rmation concerning	g this matter, please cal	IC:				
Teres	a DeSimone		.0*) ว วย	28 2660		
		f Contact Person	at (2)	/2 38 Area Code	18-2669 Dayrime T	Telephone Number	
Divisi Regist P.O. E	JNG ADDRESS: on of Corporations ration Section dox 6327 assee, FL 32314	Di ^o Re Cli 26	REET ADD vision of Con gistration Sec ifton Building 61 Executive lialnassee. FL	contions dian Center Circle	·	·	
	check for the fi 5.00 Filing Fee	ollowing amount: \$130.00 Filing Fee Cenificate of State		i5.00 Filing Fee rtified Copy		160.00 Filing Fee, Certit f Status & Certified Cop	

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:

LSREF3/AH Chicago, LLC	
(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," a	r "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate nationally Company," "L.I.C," or "LI.C,")	ame must include "Limited
2. Delaware 3 38-3910359	
(Jurisdiction under the law of which foreign limited liability (FE) number, if applied company is organized)	able)
4. Upon filing	
(Date tirst transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	20 74 14
5	C C C
2711 N. Haskell, Suite 1700, Dallas, Texas 75204	38 8 7
(Street Address of Principal Office)	
6.	
V·	177.00
2711 N. Haskell, Suite 1700, Dallas, Texas 75204 (Mailing Address)	
(Mailing Address)	50 A
7. The name, title or capacity and address of the person(s) who has/have authority to me	anage is/are:
Michael D. Thomson - President	,
Marc L. Lipshy - Vice President and Secretary	
Monica Knake - Assistant Vice President	
TOTAL CHARC - Malagar Free (Caucin	
8. Attached is an original certificate of existence, no more than 90 days old, duly authent	icated by the official
having custody of records in the jurisdiction under the law of which it is organized. (A p	hotocopy is not
acceptable. If the certificate is in a foreign language, a translation of the certificate under	oath of the translator
must be submitted)	
Morice Locke	_
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 perjury in aware that any false imbrination submitted in a document to the Department of State constitutes a third degree felony as provide	that the facts stated herein are true. It
Monica Knake, Assistant Vice President of the Sole Member	
Typed or printed name of signee	_

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.

1. The name	of the Limited Liability	Company is:	
LSREF3/AH C	hicago Tenant, LLC		
If unavailable	e, the alternate to be use	d in the state of Florida is:	
		·	· 720 20
2. The name	and the Florida street a	ddress of the registered agent and office are:	ZON OCT -
	C T Corporation Syster	מ	9
		(Name)	
	1200 South Pine Island	Road	: 22
	Florida S	itreet Address (P.O. Box NOT ACCEPTABLE)	- 10%
	Plantation	FT_ 33324	
	 	City/State/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 605, Florida Statutes.

By:	C T Corporation System	والمعرب	1 %		
	(Si _i	gnoture)	Michael	Ε.	Jones

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

Delaware

D A C P

The First State

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

DELAWARE, DO HEREBY CERTIFY "LSREF3/AH CHICAGO, 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 EIGHTH DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5352641 8300

141272673

You may vorify this cortificate onli-

jettrey W. Bullock, Secretary of State

DATE: 10-08-14