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INC. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666					
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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	TJC APSHAWA ROAD FL, LLC	:	
	1	Name of Limited Liability Company	•
The enclo Existence	osed "Application by Foreign Limited I.e., and check are submitted to register th	Liability Company for Authorization to Transact Business in Florida, ne above referenced foreign limited liability company to transact busing	'Certificate of ness in Florida
Please ret	turn all correspondence concerning this	s matter to the following:	
		Name of Person	
		Firm/Company	
		Address	
		City/State and Zip Code	
	mmotisi@	Kayne capital. com ess: (to be used for future annual report notification)	
For furthe	r-mail address information concerning this matter, p	olease call:	MAR 16 AI
-	Name of Contact Person	n Area Code Daytime Telephone Number.	OD 75m
1 4 1	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	d is a check for the following am \$125.00 Filing Fee \$130.00 Fi Certificate	iling Fee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Ce	

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. TJC APSHAWA ROAD FL, LLC (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. The alte- Liability Company," "L.L.C," or "LLC.")	rnate name must include "Limited
2. Delaware 3.	
(Jurisdiction under the law of which foreign limited liability (FEI number, if company is organized)	applicable)
4	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
c/o Kayne Anderson Real Estate Advisors, LLC, One Town Center Road, Suite 300	
Boca Raton, Florida 33486	
(Street Address of Principal Office)	
c/o Kayne Anderson Real Estate Advisors, LLC, One Town Center Road, Suite 300	
Boca Raton, Florida 33486	
(Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority FJC JV, LLC, its Sole Member	to manage is/arean
, and a second s	76
c/o Kayne Anderson Real Estate Advisors, LLC, One Town Center Road, Suite 300	3 3 1 1 1
Boca Raton, Florida 33486	32
3. Attached is an original certificate of existence, no more than 90 days old, duly autaving custody of records in the jurisdiction under the law of which it is organized, ecceptable. If the certificate is in a foreign language, a translation of the certificate nust be submitted)	(A photocopy is not
Maganthaisi	
Signature of an authorized person n accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of m aware that any false information submitted in a document to the Department of State constitutes a third degree felony as	perjury that the facts stated herein are true, provided for in s.817,155, F.S.)
Meegan Motisi	
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 Co	ompany is:		
TJC APSHAW	A ROAD FL, LLC			
lf unavailable	the alternate to be used in	the state of Florida is:		
2. The name	and the Florida street addre	ess of the registered agent and office are		
	NRAI Services, Inc.			
		(Name)		
	1200 South Pine Island Roa	d	5	
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)		~ ;
	Plantation	FL 33324		:-
		City/State/Zip	8: 34 15: 48	** ** **** #
liability comp registered ago statutes relati	oany at the place designated ent and agree to act in this ing to the proper and compl	and to accept service of process for the all in this certificate. I hereby accept the apcapacity. I further agree to comply with the eleperformance of my duties, and I am foregistered agent as provided for in Chapt	ppointment as the provisions of amiliar with and	
	NRAI Services, Inc. By: SUS fine	BuscaemelA Signature)		
	\$ 106 \$ 25	5 11		

Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

\$ 30.00

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "TJC APSHAWA ROAD 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 THIRTEENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TJC APSHAWA ROAD FL, LLC" WAS FORMED ON THE TENTH DAY OF MARCH, A.D. 2015.

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

15 MAR 16 AM 8: 34

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Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 2197936

DATE: 03-13-15

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