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SECULIVE OF STATE

NOV 0 6 2015

S. YOUNG

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 861497 7814304

AUTHORIZATION

COST LIMIT (

ORDER DATE: November 5, 2015

ORDER TIME: 10:46 AM

ORDER NO. : 861497-005

CUSTOMER NO: 7814304

FOREIGN FILINGS

NAME:

CH RETAIL FUND I/TALLAHASSEE

MAGNOLIA GROVE, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

) A 4

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. CH Retail Fund I/Talla (Name of Fore	hassee Magnolia Grove, L.L.C. eign Limited Liability Company; mu	st include "Limited Lia	bility Company," "L.L.	C" or "LLC.")
	Iternate name adopted for the purpos			
Liability Company," "L.L.C.	" or "LLC.")			
2. Delaware		3 35-6	(FEI number, if app	
company is organized)	of which foreign limited hability		(FEI number, if app	licable)
4, 11/4/2015			, and the second	
	(Date first transacted busine (See sections 605,0904 & 605	ss in Florida, if prior to .0905, F.S. to determin	registration.) e penalty liability)	
5. 3819 Maple Avenue, I				
		······································	······································	
	(6			
(Street Address of Principal Office)				en en en
6. 3819 Maple Avenue, D	anas, i txas 75219			—— 初語 上 [
				966 H
	(Mailing .	Address)		
7. Name and street address	ss of Florida registered agent: (P.	O. Box NOT accept	able)	्र इंट्रे इ
Name:	Corporation Service Company			資がる
Office Address:	1201 Hays Street		_	
	Tallahassee		Florida <u>32301</u>	
	(City)		Zip co	de)
this application, I hereby with the provisions of all.	gistered agent and to accept servacept the appointment as regist statutes relative to the proper an ition as registered agent, Corporation Service Compar By:	tered ugent and agre d complete performa	e to act in this capac ince of my duties, an	ity. I further agree to comply
9 The name title or some	ooitaad addaaaa afaba aaaaa (a)	<i>j</i>		
-	acity and address of the person(s) , 3819 Maple Avenue, Dallas, To		ny to manage is/are.	
(MANAGER)	, 3819 Maple Avenue, Danas, Te			
IMANAGERI				
			······································	The state of the s
9. Attached is a certificate jurisdiction under the law of the translator must be sa	of existence, no more than 90 da of which it is organized. (If the co abmitted)	ys old, duly authentic ertificate is in a foreig	cated by the official h	aving custody of records in the tion of the certificate under oath
	Signature	of an authorized person	n	
This document is executed	in accordance with section 605.0			hat any false info
submitted in a document to	the Department of State constitu	ites a third degree felo	ony as provided for in	1 s.817.155, F.S.

M. Kevin Bryant, Vice President of Retail Managers, I, L.L.C., manager of

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CH RETAIL FUND I/TALLAHASSEE MAGNOLIA

GROVE, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF

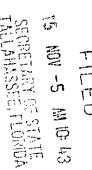
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF

NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CH RETAIL FUND I/TALLAHASSEE MAGNOLIA GROVE, L.L.C." WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2015.

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



5839475 8300 SR# 20150789793 Jeffrey W Bulliack, Secretary of State

Authentication: 10367690

Date: 11-05-15