## Florida Department of State

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## Foreign Limited Liability Company NF III/CI Orlando F, LLC

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## 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:

NF HIVCL Orlando F, LLC

1. NF III/Cl Orlando F, L (Name of Fore	LC eign Limited Liability Company; mu	st include "Limited Lin	nbifity Company," "IL.C	.," or "LLC.")
(If name unavailable, enter a Liablity Company," "L.L.C,	Iternate name adopted for the purpose " or "LLC.")	e of transacting busine	ss in Florida. The alternat	te name must include "Limited
2. Delaware		a Applied for		
(Jurisdiction under the law company is organized)	er the law of which foreign limited liability (FEI number, if applicable			cable)
4. Upon qualification				
	(Date first transacted busine (See sections 605.0904 & 605.	ss in Florida, if prior to	o registration.)	<del></del>
5. 3424 Peachtree Road,	•			
Atlanta, GA 30326				27
	(Street Address of I	rincipal Office)		
6. 3424 Penchtree Road, 1	·	,		in I
U,				- B 2
Atfanta, GA 30326	0.4-10	~		— % 5 m
	(Mailing A	Address)		
<ol><li>Name and street address</li></ol>	s of Florida registered agent: (P.	O. Box NOT accep	table)	ST =
Name:	C T Corporation System			<u>≅</u> Ξ
Office Address:	1200 South Pine Island Road		<del>-</del>	D. o
	Plantation		, Florida 33324	,
	(City)	<del></del>	(Zip code	o)
designated in this applicate to complywith the provision accept the obligations of a	gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the pay position as registered agent.  The Corporation Symptoms of the corporation of the pay and the corporation of the c	ment us registered of proper and complete estem Jin Song,	gent and agree to act to performance of my dinameter Assistant Secretary	in this cupacity. I further agree lutles, and I am familiar with au
	(Registe	fred agent's signature)		
8. The name, title or capa NP III - A Portfolio Holdi	city and address of the person(s) ngs REIT, LLC, Member	who has/have autho.	rity to manage is/are:	
3424 Peachtree Road, NE,	Suite 2000			
Atlanta, GA 30326				
9. Attached is a certificate urisdiction under the law cof the translator must be su	of existence, no more than 90 day of which it is organized. (If the ce bmitted)	vs old, duly authentic artificate is in a foreign Language of an authorized perso	gn language, a translatí	ving custody of records in the on of the certificate under oath
This document is executed	in accordance with section 605.03	203 (1) (b), Florida :	Statutes, I am aware tha	it any false information
submitted in a document to	the Department of State constitut	tes a third degree fel	ony as provided for in s	.817.155, F.S.
•	James E. Conley, Jr., Authorized	I rerson Inted name of signee		
	a yped or pr	Mitori Immit or siffrice		



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

DELAWARE, DO HEREBY CERTIFY "NF III/CI ORLANDO F, 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 TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2016.

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

5967441 8300

SR# 20161123488
You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullaco, Secretary of State

Authentication: 201883703

Date: 02-24-16