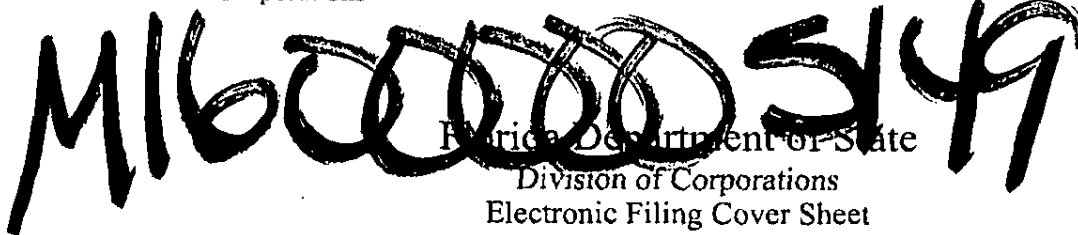


Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000153104 3)))



H160001531043ABCV

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Fax Number : (850) 617-6383

From: Account Name : REGENCY CENTERS
Account Number : I20040000052
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
Email Address: cynthiaguess@regencycenters.com

**Foreign Limited Liability Company
Ocala Retail Partners II, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02 3
Estimated Charge	\$125.00

JUN 28 2016

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

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. Ocala Retail Partners II, 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 alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. One Independent Drive, Suite 114
Jacksonville, Florida 32202
(Street Address of Principal Office)

6. One Independent Drive, Suite 114
Jacksonville, Florida 32202
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: F&L Corp.
Office Address: One Independent Drive, Suite 1300
Jacksonville, Florida 32202
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

F&L Corp.
By: Charles V. Hedrick
(Registered agent's signature)
Charles V. Hedrick, Authorized Signatory

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Regency Centers, L.P., Manager
One Independent Drive, Suite 114
Jacksonville, Florida 32202

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Barbara C. Johnston
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Barbara C. Johnston

Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN 27 AM 6:18

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OCALA RETAIL PARTNERS II, 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-THIRD DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OCALA RETAIL PARTNERS II, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JUNE, A.D. 2016.

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

16 JUN 27 AM 6:18
SECRETARY OF STATE
CALLAND SEELYE



6075902 8300

SR# 20164606025

You may verify this certificate online at corp.delaware.gov/authver.shtmlA handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202543162

Date: 06-23-16

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#231 P.002/004



June 24, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

REGENCY CENTERS

SUBJECT: OCALA RETAIL PARTNERS II, LLC
REF: W16000045153

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

According to section 605.0902, Florida Statutes, the application for Certificate of Authority must be made on the forms prescribed and furnished by the Department of State. Therefore, your application is being returned and the correct form is enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H16000153104
Letter Number: 616A00013337

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