

| (Re                     | questor's Name)                      |      |  |  |
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| (Ad                     | dress)                               |      |  |  |
|                         | •                                    |      |  |  |
| (Cit                    | ty/State/Zip/Phone                   | e #) |  |  |
| PICK-UP                 | ☐ WAIT                               | MAIL |  |  |
|                         |                                      |      |  |  |
| (Bu                     | siness Entity Nan                    | ne)  |  |  |
|                         |                                      |      |  |  |
| (Do                     | cument Number)                       |      |  |  |
|                         |                                      |      |  |  |
| Certified Copies        | tified Copies Certificates of Status |      |  |  |
|                         |                                      |      |  |  |
| Special Instructions to | Filing Officer:                      |      |  |  |
|                         |                                      |      |  |  |
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#6 AU6 -1 AH 8:38

RECAR THE STATE OF SAME

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT | NO. | : | 120000000195 |
|---------|-----|---|--------------|
|         |     |   |              |

REFERENCE : 237746 7814304

AUTHORIZATION : Knell ble man

COST LIMIT : \$/125.00

ORDER DATE : July 29, 2016

ORDER TIME : 9:32 AM

ORDER NO. : 237746-005

CUSTOMER NO: 7814304

## FOREIGN FILINGS

NAME: CH RETAIL FUND I/TALLAHASSEE

MAGNOLIA II, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

## 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:

|  | lahassee Magnolia II, L.L.C.  |                                       |                           |       |
|--|---|---------------------------------------|---------------------------|-------|
|  | eign Limited Liability Company: must include "Limit   | ed Liability Company," "L.L.C" or     | r "LLC.")                 |       |
| (If name unavailable, enter a                        | Iternate name adopted for the purpose of transacting in "LLC.")   | ousiness in Florida. The alternate na | me must include "Limite   | ed    |
| 2. Delaware  | 3.  |                                       |                           |       |
| (Jurisdiction under the law<br>company is organized) | of which foreign limited liability  | (FEI number, if applicable            | :)                        |       |
| 4.   | (Date first transacted business in Florida, if p<br>(See sections 605.0904 & 605.0905, F.S. to det              | prior to registration.)               | _                         |       |
| 2010 Manda Assansa                                   |   | ermine penalty liability)             |                           |       |
| 5. 3819 Maple Avenue, Dalias, TX 75219               |   |                                       | _ ≥SS <b>55</b>           |       |
|  |   |                                       | CR &                      |       |
|  | (Street Address of Principal Office)  | · · · · · · · · · · · · · · · · · · · | 一美芸易                      |       |
| 6. 3819 Maple Avenue,                                | Dallas, TX 75219  |                                       | _ SSS 上                   |       |
|  |   |                                       | As _                      | П     |
|  | (Mailing Address)   |                                       | - 声の 華                    | (_)   |
| 7 Name and street address                            | s of Florida registered agent: (P.O. Box NOT a  | occumtable)                           | 원판 수                      |       |
| 7. Name and Street addres                            | Sol Florida registered agent. (F.O. Box 1801 a  | eceptable)                            | DA 38                     |       |
| Name:  | Corporation Service Company   |                                       |                           |       |
| Office Address:                                      | 1201 Hays Street  |                                       |                           |       |
|  | Tallahassee   | , Florida 32301                       |                           |       |
|  | (City)  | (Zip code)                            | _                         |       |
| designated in this applicat                          | gistered agent and to accept service of process j<br>tion, I hereby accept the appointment as registe           | red agent and agree to act in the     | is capacity. I further    | agree |
| accept the obligations of n                          | ons of all statutes relative to the proper and com my position as registered agent. Corporation Service Company |                                       |                           |       |
|  | By:   |                                       | Vice President            |       |
|  | (Registered agent's signa   | iture)                                |                           |       |
| 8. The name, title or capa                           | city and address of the person(s) who has/have a  | uthority to manage is/are:            |                           |       |
| Retail Managers I, L.L.                              | C., 3819 Maple Avenue, Dallas, Texas 75219  |                                       |                           |       |
| (MANAGER)  |   |                                       |                           |       |
|  |   |                                       |                           |       |
|  |   |                                       |                           |       |
| Attached is a certificate                            | of existence, no more than 90 days old, duly auth   | nenticated by the official having     | custody of records in t   | he    |
|  | of which it is organized. (If the certificate is in a t   | foreign language, a translation of    | f the certificate under o | oath  |
| of the translator must be su                         | bmitted)  |                                       |                           |       |
|  |   |                                       | <del>.</del>              |       |
|  | Signature of an authorized p  | erson                                 |                           |       |
|  | in accordance with section 605.0203 (1) (b), Flor<br>the Department of State constitutes a third degre          |                                       |                           |       |
|  | Daniel F. Eccast Vice President of Retail Man   | nagers I, L.L.C.                      |                           |       |
|  | Typed or printed name of sig  |                                       | -                         |       |

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## Delaware The First State

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

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

II, 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 TWENTY-NINTH DAY OF JULY,

A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CH RETAIL FUND I/TALLAHASSEE MAGNOLIA II, L.L.C." WAS FORMED ON THE TWENTY-NINTH DAY OF JULY, A.D. 2016.

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

SECRETARY OF STATE
TALL AHASSEF FLORIDA



Authentication: 202747186

Date: 07-29-16

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