

m12000002775

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

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From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 876-5368

file on a new original filing  
Date of submission 5/7

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
MCCRARY HOLDINGS I, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$25.00

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May 8, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MCCRARY HOLDINGS I, LLC  
P.O. BOX 3429  
EL SEGUNDO, CA 90245US

SUBJECT: MCCRARY HOLDINGS I, LLC  
REF: M12000002775

**\*RE-SUBMIT\***

date of submission 5/7

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.

**YOU HAVE SUBMITTED AN INCORRECT FORM. PLEASE SUBMIT THE AMENDMENT FOR A FOREIGN LLC.**

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.

Terri J Schroeder  
Regulatory Specialist II

FAX Aud. #: H15000111912  
Letter Number: 615A00009638

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** McCrary Holdings I, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emily Pearl  
Name of Person

c/o CT - NRAI  
Firm/Company

1999 Bryan Street, Suite 900  
Address

Dallas, TX 75201  
City/State and Zip Code

Emily.Pearl@wolterskluwer.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emily Pearl at ( 949 ) 743-8138  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

- 1. Name of limited liability Company as it appears on the records of the Florida Department of State: McCrary Holdings I, LLC
- 2. The Florida document number of this limited liability company is: M12000002775
- 3. Jurisdiction of its organization: Texas
- 4. Date authorized to do business in Florida: May 16th, 2012

**SECTION II (5-9 complete only the applicable changes)**

- 5. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

- 6. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_  
Enter Florida Street Address

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:  
*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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

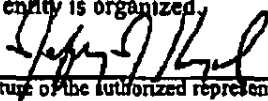
- 7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: \_\_\_\_\_

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8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Landmark Infrastructure Asset OpCo LLC	2141 Rosecrans Ave., Suite 2100 Los Angeles, CA 90245	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jeffrey Knyal	2141 Rosecrans Ave., Suite 2100 Los Angeles, CA 90245	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Jeffrey Knyal, Member of Landmark Infrastructure Asset OpCo, LLC, Manager

Typed or printed name of signee

Filing Fee: \$25.00

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