

Division of Corporations

M170000879163

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From: Account Name : BROAD AND CASSEL (BOCA RATON)
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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: eaa@zomusa.com

Foreign Limited Liability Company
ZOM Maizon GP, LLC

Table with 2 columns: Description and Value. Rows include Certificate of Status (0), Certified Copy (0), Page Count (03), and Estimated Charge (\$125.00).

2017 MAR 30 PM 3:57

TALLAHASSEE FLORIDA

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17 MAR 30 AM 9:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Fax Audit No. H17000087916 3

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. ZOM MAIZON GP, 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. 2001 SUMMIT PARK DRIVE, SUITE 300 ORLANDO, FL 32810 (Street Address of Principal Office)

6. 2001 SUMMIT PARK DRIVE, SUITE 300 ORLANDO, FL 32810 (Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CORPORATION SERVICE COMPANY Office Address: 1201 HAYS STREET TALLAHASSEE, Florida 32301 (City) (Zip code)

Registered agent's acceptance: Having been named as registered agent and to accept services 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.

(Signature of Registered Agent) Tina Qualls Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage/are: ZF DEVELOPMENT II, LLC, MANAGER 2001 SUMMIT PARK DRIVE, SUITE 300 ORLANDO, FL 32810

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)

(Signature of authorized person) 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.

SAMUEL C. STEPHENS, III, EXECUTIVE VP OF MANAGER (Typed or printed name of signer)

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ZOM MAIZON GP, 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 THIRTIETH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZOM MAIZON GP, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF MARCH, A.D. 2017.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

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