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2017 JUN 20 AM 8: 17
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J. HARRIS

2017 JUN 20 AM 10: 50

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee. FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 681149 _ 4301677

AUTHORIZATION : Spelle Man

COST LIMIT : \$\(^12\)5\(^10\)

ORDER DATE: June 13, 2017

ORDER TIME : 9:24 AM

ORDER NO. : 681149-005

CUSTOMER NO: 4301677

FOREIGN FILINGS

NAME: SETAI 3804 OWNERS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

me mavailable, enter alternate m	and adopted for the purpose of transacting b	usiness in Florida. The a	itternate name must include "L	inmed Liabilit	ty Company," "L.L.C," c	r"LLC."
Delaware		3	46-3800032			
(Jurisdiction under the law of wh	nch foreign limited liability company is orga	mized)		(FEI number,	if applicable)	
	(Date this transacted business in Plot (See sections 605 0904 & 605 0905, 1	da, il prior to registratio S. to determine penalty	n.) · liability)			
101 20th St., #3804,	Miami Beach, Fl 33139	6.	595 Madison Ave 2			022
(Sucer Address of P	rincipal Office)			nling Address	a Ao	22
			Attn: John Tashjia	in	<u></u>	=======================================
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Name and street addres	s of Florida registered agent: ((P.O. Box <u>NOT</u>	acceptable)		338 338	0
Name:	Corporation Service Com	pany			<u> </u>	F
Office Address:	1201 Hays Street				207. 1.05	ä
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	Tallahaasaa		221	201	50	
ving been named as re ignated in this applica comply with the provisi	Tallahassee (Ca tance: gistered agent and to accept s tion, I hereby accept the appo ons of all statutes relative to the s of my position as registered a Corporation Service Compa	ervice of process intment as regist he proper and co avent.	tered agent and agree	(Zip code) limited li e to act in	this capacity. I	furthe. miliar Zendo
signated in this applica comply with the provisi d accept the obligations 'The name, title or capa	tance: gistered agent and to accept s tion, I hereby accept the appo tons of all statutes relative to to s of my position as registered a Corporation Service Compa By: (Registered)	ervice of process intment as regist he proper and co agent. any seced agent's signature (s) who has have	for the above stated agent and agree omplete performance authority to manage	(Zip code) limited li e to act in of my du	this capacity. I ties, and I am fa Melissa Z Asst. Vice l	furthe miliar Zendo Presio
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Typed or printed name of signee

Page 1

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "SETAI 3804 OWNERS, 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 NINETEENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SETAI 3804 OWNERS, LLC" WAS FORMED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2013.

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

Authentication: 202735710

Date: 06-19-17