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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (800) 355-4647 Fax Number : (800) 432-3622

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Email Address:

## Foreign Limited Liability Company CS1031 JACKSONVILLE FL HQ MASTER LESSEE, LLC

| Certificate of Status |       |       | 1      |
|-----------------------|-------|-------|--------|
| Certified Copy        |       | 1     | 1      |
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MAY 1 6 2018

| APPLICATION BY FO  | oreign limited liability com<br>in Pl  | IPANY FOR AUTHORIZAT<br>ORIDA   | TION TO TRANSACT BUSINESS  |
|--|--|---|--|
|  | TION 603.0902, FLORIDA STATUTIS, THE FI<br>USINESS IN THE STATE OF FLORIDA   | DLIDWING TS SUBMETED TO RE  | EGISTER A POREKIN LIMITED LIABILITY  |
|  | nville FL HQ Master Lessee, L  |   | IC-  |
|  | · · · ·  |   | ·  |
| (If terms converibble, enter elements :<br>> Delaware  | was adopted for the purpose of usualisting business in Flor  | ids. The sisseness name next include "Lich                            | ted Liebility Company," "L.L.C," or "LLC,")                                |
|  | sich foreign limited lisbility company is organized)   | 3   | I number, if applicable)   |
| 4.   |  | ,   |  |
|  | (See motions 505,0904 & 605,0903, F.S. to determine  | rganistion.)<br>se penalty flability)                                 |  |
| 5. 10900 Nuckols R   | d., Suite 200  | 6, 10900 Nuckole R  | ld., Suite 200   |
| Glen Allen, VA 2   |  | Gien Allen, VA 2  | • ,  |
|  |  |   |  |
|  |  |   | <u> </u>   |
| 7. Name and street addres  | s of Plorica registered agant: (P.O. Box   | NOT acceptable)   | HAY<br>CAKE<br>YAH   |
| Name:  | InCorp Services, Inc.  | <del></del>   |  |
| Office Address:  | 17888 67th Court North   | <del></del>   | SSS S  |
|  | Loxahatchee  | , Florida 3347  |  |
| Registered agent's accep-  | (City)   | · (7.   | ap code)   |
| and accept the obligations   | cons of all statutes relative to the proper of my position as registered agent.    Megan   Canada   Ca | Megen Bersey on behalf  | of InCorp Services, Inc.   |
| ····   | 10900 Nuckols Rd., Suite 200   |   |  |
|  | Glen Allen, VA 23060   | ~<br>- '' '' ''   |  |
| (Use attachments if necess   |  |   |  |
| •  | **   | <b>-</b>  | <del></del>  |
| ). Attached is a certificate our<br>arisdiction under the law of<br>if the translator must be su | of existence, no more than 90 days old, do<br>if which it is organized. (If the certificate<br>bmitted)  | aly authenticated by the official<br>is in a foreign language, a tran | il having custody of records in the salation of the certificate under eath |
| 9. This document is execu-<br>about the document to  | ted in accordance with section 695.0203 (<br>the Department of Plate constitutes a third   | (1) (b), Florida Statutes. I am a<br>d degree felony as provided for  | ware that any false information r in a.817.155, F.S.                       |
| •  | . Signature of   | en authorized person  | <del></del>  |
|  | Louis Rogers   | <i>a</i> 1  |  |
| •  | Typed or pr  | frank man of signal production of                                     | ·  |

## Delaware The First State

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CS1031 JACKSONVILLE FL HQ MASTER
LESSEE, 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 TEXTE DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CS1031

JACKSONVILLE FL HQ MASTER LESSEE, LLC" WAS FORMED ON THE NINTH DAY

OF MAY, A.D. 2018.

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

40

6879110 8300 SR# 20183582930

You may verify this certificate online at corp.delaware.gov/authver.shtml

MSG.

Authentication: 202667056

Date: 05-10-18