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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

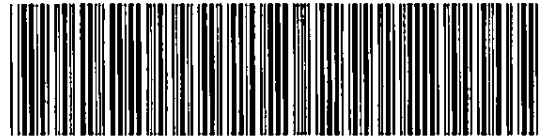
(Business Entity Name)

(Document Number)

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D BRUCE
SEP 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Edwards Associates Delray II, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Susan Wilgus
Name of Person
The Edwards Companies
Firm/Company
495 South High Street, Suite 150
Address
Columbus, OH 43215
City/State and Zip Code
swilgus@edwardscompanies.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Susan Wilgus at (614) 241-2070
Name of Contact Person Area Code Daytime Telephone Number

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

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. Edwards Associates Delray II, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. OHIO 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 495 S. High Street 6. 495 S. High Street
(Street Address of Principal Office) (Mailing Address)
Suite 150 Suite 150
Columbus, OH 43215 Columbus, OH 43215

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
 Name: Henry B. Handler, Esq
 Office Address: 2255 Glades Road, Suite 218-A
Boca Raton, Florida 33431-7392
(City) (Zip code)

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

X B. Handler
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>
<u>Manager</u>	XXXXXXXXXX <u>Edwards Tower, LLC</u> <u>495 S. High Street</u> <u>Suite 150</u> <u>Columbus, OH 43215</u>	
_____	_____	_____
_____	_____	_____

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(Use attachments if necessary)

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)

10. 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.

Dean Kissos, CFO
Signature of an authorized person
Typed or printed name of signee

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show EDWARDS ASSOCIATES DELRAY II, LLC, an Ohio For Profit Limited Liability Company, Registration Number 4220615, was organized within the State of Ohio on August 15, 2018, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 22nd day of August, A.D. 2018.

Jon Husted

Ohio Secretary of State

Validation Number: 201823400100