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Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
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COVER LETTER

	ntion Section of Corporation:	<b>:</b>		
SUBJECT:	Reta	il Aguisit	ins LLC	
		Name of Li	mited Liability Company	
				anct Business in Florida," Certificate of company to transact business in Florida.
Please return all	correspondence c	oncoming this matter to the R	ollowing:	
		Oprio	HENDERSON me of Person	
		Nai	me of Person	•
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		Pin	m/Company	
	39	15 Dr Mand	on wher	tang Jr Buld,
			Address	•
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		City/Str	nte and Zip Code	
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For further infor	mation concernin	g this matter, please call:		
_0	Dourd !	Jer Lei Sor	at ( 344) 8 Area Code Days	23095] ime Telephone Number
	ING ADDRESS:			ADDRESS:
	ation Section		Registrati	on Section
	ox 6327 nssee, FL 32314			uiding cutive Center Circle cc, FL 32301
	eck for the follow 5.00 Filing Fee	ring amount:  130.00 Filing Fee &  Certificate of Status	ES   55.00 Filing Fee & Certifled Capy	15 160.00 Filing Fee, Certificate of Status & Certified Copy

## COVER LETTER

	gistration Section vision of Corporations			
SUBJECT:	Retai	. Acquisit	ins LLC	
The enclosed Existence, as	d "Application by Fore nd check are submitted	gn Limited Liability Compa to register the above referen	ny for Authorization to Tranced foreign limited liability	isact Business in Florida," Certificate of company to transact business in Florid
Please return	n all correspondence co	ncerning this matter to the fo	ollowing:	
		OAVI O Nar	HENDERSON ne of Person	
		_	Aquisitias	ue
		Fin	n/Company	
	391			king Jr Buld,
		Fig	NJ Myers, F tte and Zip Code	L33916
	***************************************		te and Zip Code  Le house parke for future annual report not	
For further	information concerning	this matter, please call:		
	Dould L	en de Sou Contact Person	at (342) 8 Area Code Day	13095) time Telephone Number
Di Re P.	AILING ADDRESS: vision of Corporations egistration Section O. Box 6327 allahassee, FL 32314		Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations fon Section wilding centive Center Circle see, FL 32301
	a check for the follow \$125.00 Filing Fee	ing amount:  \$\frac{1}{2}\$130.00 Filing Fee &  Certificate of Status	12\\$155.00 Filing Fee & Certified Copy	S160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION (ISSUE), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANY TOTRANS-ICT BLASHESS IN THE STATE OF FLORIDA:
1. Rotall Agus 817 as LLC (Name of Poreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "ELC.")
(If name unavailable, enter atternate 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  Quinsdiction under the law of which foreign limited liability company is organized)  3. 38 - 4022 8-38  (FCI number, if applicable)
(Date liest transacted business in Florida, if prior to registration.)  (See sections 605.0904 & 605.0905, P.S. to determine penalty liability)
s. 3915 or Martin When King Jr Buld, = []
Fort Myers, FL 33911.  (Street Address of Principal Office)
6
(Moiling Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Registered Agents Inc.
Office Address: 3030 N. ROCY Point Drive,
STE ISO A TAMPA Florida 33607- (City) (Zip oode)
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 complywith 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.  Bill Havre, Assistant Secretary  (Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
David Huderson Nember 3915 Da Mendin When king In Buld,
- 3391L
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)
Signatural Color Delhorized 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.
Typed or printed name of signee
Million L. E. Guard Andrea as astimate

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "RETAIL ACQUISITIONS 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 SEVENTEENTH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RETAIL ACQUISITIONS LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

**6264257** 8300 **SR# 20170276557** 

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

Jet'ley W. Dalloch, Secretary of State

Authentication: 201882569

Date: 01-17-17