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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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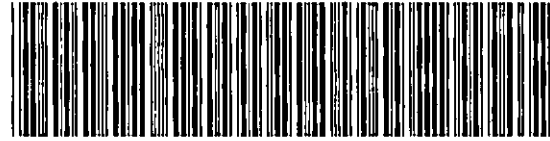
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Doc # 11/22/17  
11/22/17

**GOLDSCHMIDT LAW OFFICES PLLC**  
1250 Connecticut Avenue, NW  
Suite 200  
Washington, DC 20036  
Telephone: (202) 261-6538 Telecopy (202) 261-3508  
E-mail: stan@goldschmidtllawdc.com

November 21, 2017

**VIA FEDERAL EXPRESS**

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

RE: 9611 Kendall Investors, LLC

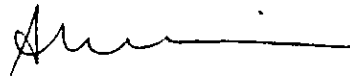
Dear Sir/Madam:

You will find enclosed an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for 9611 Kendall Investors, LLC. Also attached is a Certificate of Good of Good Standing from the State of Delaware.

You will also find enclosed (i) a check in the amount of \$130.00 to cover the filing fee and the cost of a Certificate of Status; and (ii) a self-addressed Federal Express envelope for your use in returning the Certificate of Status to me.

I would appreciate if the filing could be accomplished as soon as possible. Please contact me if you should have any questions.

Sincerely,



Stanley H. Goldschmidt

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. 9611 Kendall Investors, 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 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (If applicable)

4. N/A  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0901 & 605.0905, F.S., to determine penalty liability)

5. 215 North Eola Drive  
(Street Address of Principal Office)  
Orlando, FL 32801

6. 215 North Eola Drive  
(Mailing Address)  
Orlando, FL 32801

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Lowndes Drosdick Doster Kantor & Reid, P.A.

Office Address: 215 North Eola Drive  
Orlando, Florida 32801  
(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.

Lowndes, Drosdick, Doster, Kantor & Reid, P.A.  
By: Miranda F. Fitzgerald, Vice President  
(Registered agent's signature)

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

| Title or Capacity: | Name and Address:                                             | Title or Capacity: | Name and Address: |
|--------------------|---------------------------------------------------------------|--------------------|-------------------|
| Manager            | Joseph Reger<br>1010 Wisconsin Ave NW<br>Washington, DC 20007 |                    |                   |
|                    |                                                               |                    |                   |
|                    |                                                               |                    |                   |
|                    |                                                               |                    |                   |

(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.

Stanley Goldschmidt  
Signature of an authorized person

Stanley Goldschmidt

Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "9611 KENDALL INVESTORS, 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 FOURTEENTH DAY OF NOVEMBER, A.D. 2017.



6616222 8300

SR# 20177075240

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203570958

Date: 11-14-17