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OCT 01 2016

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 302490 4311863

AUTHORIZATION

COST LIMIT : \$(125,00 000)

ORDER DATE: September 21, 2016

ORDER TIME : 3:24 PM

ORDER NO. : 302490-015

CUSTOMER NO: 4311863

FOREIGN FILINGS

NAME: LAKE SHORE SYSTEMS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

	gistration Sec vision of Corp				
SUBJECT	Lake Shore	e Systems, Inc.			
obbite.		Name of corporat	ion -	must include suffix	
Dear Sir or	Madam:				
"Certificate	of Existence	on by Foreign Corporation	Stand	ng" and check are subr	
Please retu	rn all corresp	ondence concerning this ma	itter t	o the following:	
		Name	of Pe	erson	
		Firm/C	Comp	any	
		Ac	ddres	3	
		City/Sta	te and	Zip code	
		E-mail address: (to be us	ed fo	r future annual report n	otification)
For further	information	concerning this matter, plea	se ca	11:	
		at ())	
N	ame of Persor) Area (Code	Daytime Teleph	ione Number
Re Di Cl: 26	gistration Sec vision of Corp Ifton Building	oorations ; Center Circle		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations
Enclosed is	s a check for t	he following amount:			
570.00	Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(If name unavaila	able in Florida, enter alternate corporate na		adopted for the purpose of transacting business in Flor	rida)
2.		_ 3	81-3537960	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
August 11, 2016		5.		
(Date	of incorporation)		(Date of duration, if other than perpetual)	
5.				
3600 Laka Shara	·		502, F.S., to determine penalty liability)	
3600 Lake Shore	Lane - Hwy 8 West, Rhinelander, WI 545	01	pal office address)	e gapente
3600 Lake Shore	Lane - Hwy 8 West, Rhinelander, WI 545	01 incipa	oal office address)	
	Lane - Hwy 8 West, Rhinelander, WI 545 (Pr (Current net address of Florida registered agent:	01 incipa	oal office address)	
	Lane - Hwy 8 West, Rhinelander, WI 545 (Pr	01 incipa	oal office address)	
3. Name and stree Name:	Lane - Hwy 8 West, Rhinelander, WI 545 (Pr (Current net address of Florida registered agent:	01 incipa	oral office address)	
7 8. Name and <u>stree</u>	Lane - Hwy 8 West, Rhinelander, WI 545 (Pr (Current net address of Florida registered agent: Corporation Service Company	01 incipa	oal office address)	

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Corporation Service Company

By:

(Registered agent's signature)

Melissa Zender

Asst. Vice President

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

SEE EXHIBIT A ATTACHED

A. DIRECTORS			٠.					
Chairman:	See	<u>offac</u>	hed.					
Address:	_,	· · · · · · · · · · · · · · · · · · ·		···			_	
			<u></u>					
Vice Chairman:								
Address:						·		
Director:				· · · · · · · · · · · · · · · · · · ·				<u></u>
Address:								
Director:								
Address:							(C)	
						10	77 / 174	3
B. OFFICERS		- · · · · · ·			- -	7 T.	- 11 J	To the second
President:)** 		<i>⊙</i> >-	m
Address:					;	- S	5	U
							06	
Vice President:						-		
Address:								
71001033.							······	
Secretary:								
Address:								
Treasurer:								
Address:								
NOTE: If necessary, you m	nav attach an ac	ddendum to the	e application	listing addition	nal officers	and/or	directo	rs.
12.								
The officer or director signi	no this docume	Signature of I			affirms the	it the fa	acts stat	ted herein
are true and that he or she is a third degree felony as prov	aware that fal	se information	submitted in	a document to	the Depart	ment o	f State	constitutes
13. C. Alexander Harman, Pro	esident							
(Tv	ped or printed	name and capa	acity of perso	n signing appli	ication)			

Exhibit A

Directors and Officers of Lake Shore Systems, Inc.

Directors						
Name	Address	Address				
C. Alexander Harman	110 E. 59th Street, 27th Floo	110 E. 59th Street, 27th Floor, New York, NY 10022				
David L. Rattner	110 E. 59th Street, 27th Floo	110 E. 59th Street, 27th Floor, New York, NY 10022				
David F. Thomas	110 E. 59th Street, 27th Floor, New York, NY 10022					
Officers Name	Title	Address				
Name C. Alexander Harman	Title President and Assistant	Address 110 E. 59th Street, 27th Floor,				
	Secretary	New York, NY 10022				
David L. Rattner	Secretary	110 E. 59th Street, 27th Floor, New York, NY 10022				
David F. Thomas	Treasurer and Assistant Secretary	110 E. 59 th Street, 27 th Floor, New York, NY 10022				

TILED

OBUTARY OF STATE

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LAKE SHORE SYSTEMS, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF SEPTEMBER, A.D.

2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAKE SHORE SYSTEMS, INC." WAS INCORPORATED ON THE ELEVENTH DAY OF AUGUST, A.D. 2016.

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

and corn delaware gov/aut

Authentication: 203031757

Date: 09-21-16