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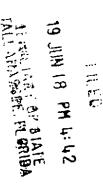
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 14, 2019

JOLA BETLEJEWSKA 2300 MARSHPOINT RD, STE 301 NEPTUNE BEACH, FL 32266

SUBJECT: MARSHPOINT PROPERTIES ONE LLC

Ref. Number: W19000056659

We have received your document for MARSHPOINT PROPERTIES ONE LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 619A00011972

Brooke N Kinsey Regulatory Specialist II

COVER LETTER

TO: Registration Section Division of Corporations			
MARSHPOINT PROPERTIE	S ONE LLC		
SUBJECT:			
Name o	f corporation - n	nust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Con"Certificate of Existence," or "Certificate above referenced foreign corporation to transfer	of Good Standin	g" and check are submitte	
Please return all correspondence concernity JOLA BETLEJEWSKA	ng this matter to	the following:	
	Name of Per	son	
MARSHPOINT PROPERTIES ONE LLC			
	Firm/Compar		
2300 MARSHPOINT ROAD, STE 301	Time Compa	•,	
	Address		
NEPTUNE BEACH, FL. 32266	7 1441 000		
	City/State and 2	Zip code	
JOLA@SKYENTERPRISES.COM		•	19 J
E-mail address	(to be used for	future annual report notifi	cation = G
For further information concerning this m	atter, please call:		18 64 4: 4
JOLA BETLEJEWSKA		853-6801	
Name of Person	at () Area Code	Daytime Telephone	Numbe 5 %
STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:	MAILING ADDR Registration Section Division of Corport P.O. Box 6327 Tallahassee, FL 32	n ations
Enclosed is a check for the following amo	aunt.		
Enclosed is a check for the following and	will.		
□ \$70.00 Filing Fee □ \$78.75 Filing Certificate of	•	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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. MARSHPOINT PROPERTIES ONE LLC 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) DELAWARE 84-1930882 (FEI number, if applicable) (State or country under the law of which it is incorporated) MAY 2, 2019 (Date of duration, if other than perpetual) (Date of incorporation) 5. _ (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2300 MARSHPOINT RD, STE 301, NEPTUNE BEACH, FL 32266 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) DAVID BURNS, ESQ. Name: 2300 MARSHPOINT RD, STE 301 Office Address: NEPTUNE BEACH _____, Florida ____ (City) (Zip code) 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. 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.

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.

(Registered agent's signature)

13 Norman and business of the Control of the Contro	
11. Names and business addresses of officers and/or directors:	
A. DIRECTORS JEAN BAKKES	
Chairman: 2300 MARSHPOINT ROAD, NEPTUNE BEACH, FL 32266	
Address:	
Vice Chairman:	•
Address:	
Director	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	
	<u> </u>
Vice President:	<u> </u>
Address:	The PA
	LES 4: 4
Secretary:	₩ N
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum-to the application listing additional officers	and/or directors.
12	
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 above) affirms that are true and that he or she is aware that false information submitted in a document to the Depart a third degree felony as provided for in s.817.155, F.S.	t the facts stated herein ment of State constitutes
13JEAN BAKKES DIRECTOR	
(Typed or printed name and capacity of person signing application)	

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

DELAWARE, DO HEREBY CERTIFY "MARSHPOINT PROPERTIES ONE 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 FOURTH DAY OF JUNE, A.D. 2019.

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

e at corp delaware gov/aut

Authentication: 202957341

Date: 06-04-19