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Division of Corporations

Florida Department of State

Division of Corporations

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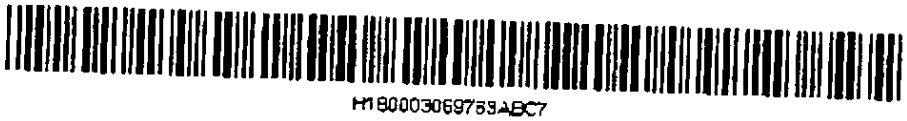

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : I20180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SHAMROCK UNI, LLC

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Estimated Charge	$55.00

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10/24/18 2s

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STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: Shamrock UNI, LLC

SECOND: The Florida Document Number of the limited liability company is: L04000005063

THIRD: The street address of the limited liability company's principal office is:

11943 N. W. 37th Street
Coral Springs, FL 33065

The mailing address of the limited liability company's principal office is:

63 Atlantic Avenue, 7E
Boston, MA 02110

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FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.
   a. Granted to:
   b. No authority granted to:
2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.
   a. Granted to: John McDonnell, Jr.
   b. No authority granted to:

John McDonnell
Signature of authorized representative

John McDonnell, Jr.
Typed or printed name of Signature

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