5/5/20 3:36:41 PM From: To: 8506176381(1/4)

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Division of Corporations

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From:

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Account Number : FCA00000023 Phone : (850)205-8842 Fax Number : (850)878-5368

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MAY -5 PH 4:

FLORIDA LIMITED LIABILITY CO.

Fountain Merger Sub, LLC

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COVER LETTER

	gistration Section vision of Corporations		
eun recer.	Fountain Merger Sub, LLC		
SUBJECT:		imited Liability Company	
The enclose	d Articles of Organization and fee(s)	are submitted for filing.	
Please retur	n all correspondence concerning this	matter to the following:	
	Shiho Inouye, Senior Corporate Para	degal	
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	Kirkland & Ellis LLP		
		Firm/Company	
	555 California Street, Suite 2700		
	, , , , , , , , , , , , , , , , , , ,	Address	
	San Francisco, CA 94104		
ŧ	shiho.inouye@kirkland.com	City/State and Zip Code	
_		ed for future annual report notification	on)
For further in	formation concerning this matter, ple	ase call:	
	Shiho Inouye	415 439-1966	
	Name of Person	Area Code Daytime Telephone	Number
Enclosed is	a check for the following amount:		
\$125.00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address	

Mailing Address
New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
New Filing Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 5/5/2016 3:36:41 PM From: To: 8506176381(3/4)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
Farmtala Mannau Cul. II C

16 MAY - 5 PM 1:52

(Must and with the

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1950 University Avenue, Suite 350	1950 University Avenue, Suite 350
Palo Alto, CA 94303	Palo Alto, CA 94303

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

CT Corporation Syst	em	
	Name	=
1200 South Pine Isla	nd Road	
Florida street addres	s (P.O. Box <u>NOT</u> ac	cceptable)
Plantation	FL	33324
City	State	Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REGURED)

(CONTINUED)

Page 1 of 2

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litle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	Bishard C Lauren Is
MGR	Richard F. Lawson, Jr. 1950 University Avenue, Suite 350
	Palo Alto, CA 94303
	Tato Tato, Ori 74505
MGR	J. Steven Young
	1950 University Avenue, Suite 350
	Palo Alto, CA 94303
MGB	Neil White
MGR	1950 University Avenue, Suite 350
	Palo Alto, CA 94303
MGR	Steven Leistner
•	1950 University Avenue, Suite 350
	Palo Alto CA 94303
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