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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ICRE, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JULIE BODDEN
Name of Person
INTRAWEST
Firm/Company
1621 18TH STREET, SUITE 300
Address
DENVER, CO 80202
City/State and Zip Code
PARALEGALS@INTRAWEST.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIE BODDEN 303 749-8216
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing 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
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

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DIVISION OF CORPORATIONS

INTRAWEST

September 6, 2017

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Conversion of ICRE, Inc. to ICRE, LLC

Dear Sir/Madam:

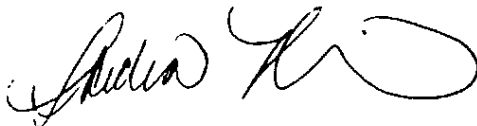
Enclosed, please find Articles of Organization for Florida Limited Liability Company and an Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida, along with a check for \$160 for filing fees. Please file the attached forms and return file-stamped copies to me at the address set forth below.

If there are problems with this request or if you need additional information, please call me at 303-749-8328 or email me at spschenica@inrawest.com.

Thank you for your assistance.

Very truly yours,

ICRE, LLC



Sandy Pschenica
Legal Assistant

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ICRE, LLC

(Must contain 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:

1621 18TH STREET, SUITE 300
DENVER, CO 80202

1621 18TH STREET, SUITE 300
DENVER, CO 80202

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:

CORPORATION SERVICE COMPANY

Name

1201 HAYS STREET

Florida street address (P.O. Box NOT acceptable)

<u>TALLAHASSEE</u>	<u>FL</u>	<u>32301</u>
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..

Rosemarie Gagliardino
Registered Agent's Signature (REQUIRED)

Rosemarie Gagliardino
Assistant Vice President

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

INTRAVEST U.S. HOLDINGS INC.

1621 18TH STREET, SUITE 300

DENVER, CO 80202

(Use attachment if necessary)

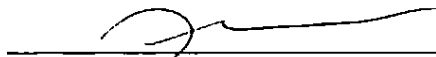
ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

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.

Julie Bodden

Secretary

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)