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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SS SPRING HILL, LLC	
(Name of Limited L	iability Company)
The enclosed "Application by Foreign Limited Liability Florida," Certificate of Existence, and check are submitt liability company to transact business in Florida	
Please return all correspondence concerning this matter	to the following:
Paula R. Bloodsaw, Paralegal	
(Name of	Person)
Broad and Cassel	NAS TO
(Firm/Co	Person)  ALLAHASSEE, FLORE  mpany)
390 N. Orange Avenue, Suite 1100	<u> </u>
(Addr	ess)
Orlando, Florida 32801	
(City/State and	d Zip Code)
For further information concerning this matter, please ca	11:
Paula R. Bloodsaw at (	407 839-4285
	Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
i alialiassee, Florida 32377	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$ Certificate of Status	155.00 Filing Fee & S160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BY INNESS, IN THE STATE OF FLORIDA:

SS SPRING HILL, LLC	
	eign Limited Liability Company)
Indiana	3, 20-3427598
(Jurisdiction under the law of which foreign lim company is organized)	nited liability (FEI number, if applicable)
May 20, 2005	5 Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
upon filing	
	business in Florida, if prior to registration.)  & 608.502 F.S. to determine penalty liability)
11595 N. Meridian, Suite 510	17.4.
Carmel, Indiana 48032	
(Š	Street Address of Principal Office)
If limited liability company is a manage	er-managed company, check here
. The name and usual business addresses	s of the managing members or managers are as follows:
Kurt O'Brien, Manager	
5353 Islaworth Country Club Drive	
Windermere, Florida 34786	
e jurisdiction under the law of which it is organized instation of the certificate under oath of the translate	omore than 90 days old, duly authenticated by the official having custody of recit. (A photocopy is not acceptable. If the certificate is in a foreign language, a or must be submitted.)  conducted or promoted in Florida: own real property
(In accordance with section	ber or an authorized representative of a member. on 603.403(3), F.S., the execution of this document constitutes penalties of perjury that the facts stated herein are true.)
<b>ガ</b> ∧ <b>レ</b>	
	O'Brien ed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the	Limited Liability Company is:	یہ ب
SS SPRING HILL, LL	c	100
2. The name and th	e Florida street address of the registered agent and office are:	SEP 15
Ku	rt O'Brien	严重
	(Name)	TO 10:
53	53 Isleworth Country Club Drive	ROPE
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	(,
Wir	idermere, Florida 34786 pr	_
_	City/State/Zip	
liability company at agent and agree to a relating to the prope	as registered agent and to accept service of process for the above s the place designated in this certificate, I hereby accept the appoint act in this capacity. I further agree to comply with the provisions of ar and complete performance of my duties, and I am familiar with a sittion as registered agent as provided for in Chapter 608, Florida S	ment as registered fall statutes nd accept the
	(Signature)	
	(cillimeta)	

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

# STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE



To Whom These Presents Come, Greeting:

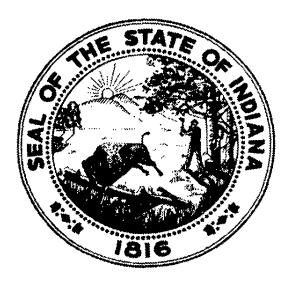
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

#### SS SPRING HILL, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on May 20, 2005, and was in existence or authorized to transact business in the State of Indiana on September 08, 2005.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Eighth Day of September, 2005.

Cost Cotito

TODD ROKITA, Secretary of State