Division of Corporation Florid Devaluations Page 1 of Corporations

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	generate another cover she	**************************************		SELLERS
10:	Division of Corporations Fax Number : (850)617-638	3	E	JUL 1 & 2010
Prom:	Account Name : C T CORPORAT Account Number : FGR000000023 Phone : (650)222-109 Fax Number : (850)878-536	2	Attu	XAMINER Locie
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July 12, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: IONA HOLDINGS LLC

REF: W10000032689

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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) 245-6967.

Leslie Sellers Regulatory Specialist II FAX Aud. #: H10000156586 Letter Number: 910A00016839

RECEIVED 10 JULIZ PH 1: 19: SECHETARY OF STATE ALLARASSEE: FLORIDA

P.O BOX 6327 - Taliahassee, Florida 32314

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

IN COMPLIANCE WITH SECTION BUSIUS, PLONIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREJON LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF PLORIDA: J. IONA HOLDINGS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") 2 DELAWARE Durisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. JUNE 8, 2010 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 6. UPON QUALIFICATION (Date first transacted business in Florids, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty Hability) 7. 5200 TOWN CENTER CIRCLE, SUITE 600 BOCA RATON, FL 33486 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, theck here 9. The name and namal business addresses of the managing members or managers are as follows: SUN IONA, LLC 5200 TOWN CENTER CIRCLE, SUITE 600 BOCA RATON, FL 33486 10. Attached is an original certificate of existence, no more than 90 days old, only authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fureign language, a translation of the certificate under outh of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: ANY AND ALL L **PURPOSES** Signature of a member or an authorized representative of a member. (in accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of porjury that the facts stated herein are true.) MICHAEL J. MCCONVERY, AUTHORIZED REPRESENTATIVE

Typed 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 PLORIDA.

the mane of one contract resourch count	Jany 15.				
If name unavailable, the alternate name to be used in the state of Florida is:					
CT CORPORATION	N SYSTEM				
	(Name)				
1200 SOUTH PINE	ISLAND ROAD				
Florida Street Add	ress (P.O. BOX NOT ACCEPTABLE)				
PLANTATION	PL 33324				
	City/State/Zip				
liability company at the place designated in ti agent and agree to act in this capacity. I furt relating to the proper and complets performa	to accept service of process for the above stated limited his certificate, I hereby accept the appointment as registered her agree to comply with the provisions of all statutes nice of my duties, and I am familiar with and accept the t as provided for in Chapter 608, Florida Statutes. Assistant Becoonsy Ashley Pipes				

Piling Fee for Application

Designation of Registered Agent Certified Copy (optional)

Certificate of Status (optional)

\$ 100.00

\$ 30.00

25.00

5.00

Delaware

PAGE :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IONA HOLDINGS, 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 SEVENTH DAY OF JULY, A.D. 2010.

AND I DO BEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

1833949 8300

100721954

THENTS CHILDRE OF SOUTH

DATE: 07-07-10

You may verify this continues out.