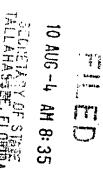
(I	Requestor's Name)		
(/	Address)		
(/	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(8	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions (to Filing Officer:		
	·		



000183744050

G. MCLEOD

EXAMINER





ACCOUNT NO. : 12000000195 REFERENCE: 462509 AUTHORIZATION : COST LIMIT : ORDER DATE : 08/04/2010 ORDER TIME : 2:37 PM ORDER NO. : 462509-005 CUSTOMER NO: 7786605 FOREIGN FILINGS NAME: MAAT, LLC MAATFL, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

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

IN COMPLIANCE WITH SECTION 608.5 LIMITED LIABILITY COMPANY TO TRANS		, THE FOLLOWING IS SUBMITTED TO REGIS TATE OF FLORIDA:	TER A FOREIGN
MAAT, LLC			
	y Company; must includ	"Limited Liability Company," "L.L.C.," or "LL	.C.")
(If name unavailable, enter alternate name consent of the managers or managing met Company," "L.L.C.," "LLC.")	e adopted for the purpose mbers adopting the altern	of transacting business in Florida and attach a coate name. The alternate name must include "Lim	opy of the written ited Liability
₂ DE	3	27-3082562	
(Jurisdiction under the law of which to company is organized)	reign limited liability	(FEI number, if applicable)	
4. 7/19/2010 (Date of Organization)	5.	perpetual (Duration: Year limited liability company will exist or "perpetual")	cease to
6. <u>n</u> /a			∑ 'c: →
(Date first tra (See sections 6	msacted business in Plori 08.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)	O A
7. 301 CLEMATIS ST. STE.			AIR I
WEST PALM BEACH FL	33401		第2 子 5
	(Street Address of	Principal Office)	
B. If limited liability company is a	manager-managed c	ompany, check here	S: 3
2. The name and usual business ad	ldresses of the manag	ing members or managers are as follows	CONTRACTOR
Adam C. Shepherd	301 Clemat	is Street Ste 3000 West Palm Be	each, FL 33401
Michael S. Dyer	301 Clemat	is Street Ste 3000 West Palm Be	each, FL 33401
	nganized. (A photocopy i	vs old, duly authenticated by the official having cust is not acceptable. If the certificate is in a foreign langued.)	
1. Nature of business or purposes	to be conducted or	romoted in Florida: To Manage and I	Purchase
Real Property.)	
(In accordance w	ich section 608.408(3), F.S.	orized representative of a member.	
	ider the penalties of perjury SHEPHERD	that the facts stated herein are true.)	

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 FLORIDA.

1. The name	of the Limited Liability	Company is:
MAAT, LI	.c	
lf name unav	ailable, the alternate nam	e to be used in the state of Florida is:
2. The name	and the Florida street add	dress of the registered agent and office are:
	Corporation Service	ре Сотралу
		(Name)
	1201 Hays Street	
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)
	Tailahassee	FL 32301
		City/State/Zip
liability compagent and agr relating to the obligations of	any at the place designate ree to act in this capacity. e proper and complete per	and to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as registered. I further agree to comply with the provisions of all statutes formance of my duties, and I am familiar with and accept the agent as provided for in Chapter 608, Florida Statutes. Carina L. Duniap Asst. Vice President
	·	0.00 Filing Fee for Application

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MAAT, 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 TWENTY-NINTH DAY OF JULY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAAT, LLC" WAS FORMED ON THE NINETEENTH DAY OF JULY, A.D. 2010.

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

4849438 8300

100783052

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 8141162

DATE: 07-29-10

You may verify this certificate online at corp.delaware.gov/authver.shtml

. . . .

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of MAAT, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
DELAWARE
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
MAATFL LLC.
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: August 4, 2010
Signature(s) of Manager(s) and/or Managing Member(s):
Adam Shepherd
\sim
1/2/