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EXAMINER



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DEPARTMENT OF STATE
DIVISION OF CORPORATION

DIVISION OF CORPORALION

11 JUL 22 PH 2: 50



ACCOUNT NO. : I2000000195

REFERENCE: 854670

7453315

AUTHORIZATION

COST LIMIT

ORDER DATE: July 22, 2011

ORDER TIME : 10:26 AM

ORDER NO. : 854670-005

CUSTOMER NO: 7453315

FOREIGN FILINGS

NAME: KRG OLDSMAR PROJECT COMPANY,

LLC

XXXX_ QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

___ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREI LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: KRG Oldsmar Project Company, 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.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) July 19, 2011 Perpetual (Date of Organization) (Duration: Year limited liability company will cerse to Upon Filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 30 S Meridian Street, Suite 1100 Indianapolis, IN 46204 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: KRG Oldsmar Management, LLC 30 S Meridian Street, Suite 1100 Indianapolis, IN 46204 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custoxly of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To conduct any and all lawful business and activities for which limited hability companies may be organized under the Act. 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 perjury that the facts stated herein are true. 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.)

Typed or printed name of signce

Daniel R. Sink, Executive Vice President & CFO

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 C	Company is:
KRG Oldsmar Project Company, LLC	,
If unavailable, the alternate to be used	in the state of Florida is:
2. The name and the Florida street add	ress of the registered agent and office are:
Corporation Service Co	ompany
	(Name)
1201 Hays Street	
Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)
Tallahassee	FL 32301
***************************************	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 608, Florida Statutes.

Corporation Service Company

By: Jacquetine N. Casper, Assistant VP
(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 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 "KRG OLDSMAR PROJECT COMPANY, 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-SECOND DAY OF JULY, A.D.
2011.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KRG OLDSMAR PROJECT COMPANY, LLC" WAS FORMED ON THE NINETEENTH DAY OF JULY, A.D. 2011.

5012923 8300

110847696

Jeffrey W. Bullock, Secretary of Sta AUTHENTY CATION: 8919302

DATE: 07-22-11

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