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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

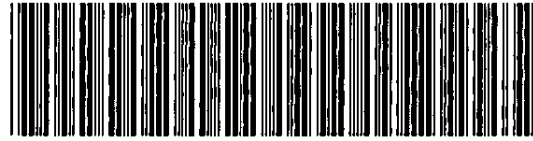
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE
JUN 11 2012
EXAMINER



ONE MIDTOWN PLAZA | 1360 PEACHTREE ST. | SUITE 1050 | ATLANTA, GEORGIA 30309 | P: 404.351.5280 | F: 404.351.5281 | WWW.SIAVAGELAW.COM

June 7, 2012

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

VIA FEDEX OVERNIGHT MAIL

SUBJECT: N-Play RE, LLC, foreign qualification and designation of registered agent

Please see the enclosed Certificate of Designation of Registered Agent/Registered Office and Application for Foreign Limited Liability Company and fees totaling \$125, comprising \$25 for the registered agent/office filing and \$100 for the foreign qualification application. Upon receipt of this filing, please send me a stamped copy of this letter (copy enclosed) via the pre-addressed stamped envelope.

Please return all correspondence concerning this matter to:

Kara Williamson
Siavage Law Group, LLC
One Midtown Plaza
10360 Peachtree Street, Suite 1050
Atlanta, Georgia 30309

Should you have any questions, please do not hesitate to contact me at (404) 537-4336.

Very truly yours,

Kara Williamson, Esq.

Enclosures:

1. Certificate of Designation of Registered Agent/Registered Office
2. Application for Foreign Limited Liability Company
3. Check for filing fees
4. Copy of letter
5. Pre-addressed, postage-page envelope

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TALLAHASSEE, FLORIDA

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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. N-Play RE, 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 (Jurisdiction under the law of which foreign limited liability company is organized)
3. (FEI number, if applicable)

4. May 29, 2012 (Date of Organization)
5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")

6. May 29, 2012 -> prior to that, company was a Florida LLC.
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 4899 Belfort Road, Suite 201
Jacksonville, FL 32256
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here [X]

9. The name and usual business addresses of the managing members or managers are as follows:
Mark Bloomfield, 4899 Belfort Road, Suite 201, Jacksonville, FL 32256
David Ivey, 303 Peachtree Street, Suite 5300, Atlanta, GA 30308

10. Attached is an original certificate of existence, no more than 90 days old, duly 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 foreign language, 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:
any business activities not prohibited by law and authorized by the company.

[Signature]
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.)

Mark Bloomfield
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE
FLORIDA

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**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:

N-Play RE, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Mark Bloomfield

(Name)

4899 Belfort Road, Suite 201

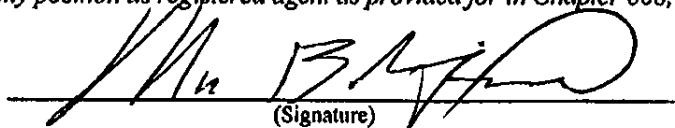
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Jacksonville

FL 32256

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.


(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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TALLAHASSEE, FLORIDA

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Delaware

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The First State

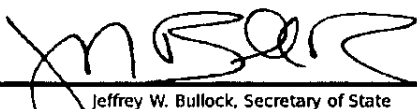
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "N-PLAY RE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF JUNE, A.D. 2012.



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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9623062

DATE: 06-06-12