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Bmail Address:

Foreign Limited Liability Company SH Group Operations, L.L.C.

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## COVER LETTER

UBJECT:	SH Group Operations, L.L.C.			
	Name of Limited Liability Company			
ne enclosed *Application by Foreign tistence, ಜಗರ check are submitted to	Limited Liability Company for Authorization to Transact Business in Flo register the above referenced foreign limited liability company to transact	uida," Certificate Libusiness In Flori	rof ida	
esse return all correspondence conce	erring this matter to the following:			
•	Jiang Lu			
	Name of Person			
	Rinaldi, Finkelstein and Franklin, LLC			
	Firm/Company			
	591 West Putnam Avenue		28	
LANCE	Address		₽ 0	
	O works OTT OFFICE	£∰	OEC	
	Greenwich, CT 05830 City/State and Zip Code			
	i			
	jhu@sterwood.com		<b>.</b>	
25-m)	all address: (to be used for future annual report notification)	92 2	00 =6; WV	
r further information concerning this	matter, please call:	<u> </u>	00	
Jiang L	u at ( 203 ) 422-7771			
Name of Per	aon Area Code & Daytime Telephone Number			
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations	stions Division of Corporations			
Registration Section P.O. Box 6327	n Registration Section Clifton Building			
Tailahasses, FL 32314	2661 Executive Center Circle		•	
	Tellahasses, FL 32301			
closed is a check for the follow	ving amount:			
\$125,00 Piling Fee 3	130.00 Filing Fee &\$155.00 Filing Fee &\$160.00 Filing Fe	<b></b>		

FLU37 - 05/04/2009 CT System Online

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If par	me unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the	write
conse	ent of the manugers or managing members adopting the alternate name. The alternate name must include "Limited Liabi pany," "L.L.C," "LLC.")	
2.	Delaware 3. 26-4006966	_
(Jur	Delaware 3. 26-4006966 risdiction under the law of which foreign limited liability (FBI number, If applicable) npany is organized)	-
4.	01/09/2009 .5. Perpetual	
	(Dute of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	•
6. <u>U</u> 1	oon filing	•
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	<u>بر</u>
7. <u>59</u>	I West Putnam Avenue	218
G,	reenwich, CT 06830	2012 DEC
	(Street Address of Principal Office)	. 19
0 TE1	m ← Makilitan announce is a managar announce about how M	
D. 11	limited liability company is a manager-managed company, check here	=
), Th	no name and usual business addresses of the managing members or managers are as follows:	<u>₹</u>
SI	H Group Management Holdings, L.L.C.	8
59	91 West Pulnem Avenue	i
Ģ	reanwich, CT 06830	
hejuni	tached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of red ediction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a liveign language, a ion of the certificate under oath of the translator must be submitted.)	ordsin
1. N	ature of business or purposes to be conducted or promoted in Florids:	
	Real estate and related Sperutions	,
	from che	
	Signature of a mepriber or an authorized representative of a member.	
	(In accordance with section 608.408(3), F.S., this execution of this document constitutes an affirmation under the populate of parjury that the facts stated herein are true.)	
	Jenome C. Silvey	
	Typed or printed name of signee	

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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.

I. The name of the	Limited Liability Com	pany is:
	SH Gro	oup Operations, L.L.C.
If unavailable, the a	lternate to be used in th	he state of Florida is:
2. The name and the	e Florida street address	of the registered agent and office are:
·	C1	T Corporation System
<del></del> -		(Name)
مانية المانية		South Pine Island Road  dress (P.O. Box NOT ACCEPTABLE)
	Plantation	South Pine Island Road  dress (P.O. Box NOT ACCEPTABLE)  FIL 33324  SORR
liability company at the agent and agree to accretating to the proper obligations of my posi-	he place designated in t n in this capacity. I furt and complete performa ition as registered agen	City/State/Zip  to accept service of process for the above stated limited of this certificate, I hereby accept the appointment as registered therefore accept the appointment as registered ance of my duties, and I am familiar with and accept the state of the provided for in Chapter 608, Florida Statutes.
By: CT Corpore	(Signature)  \$ 100.00 \$ 25.00 \$ 30.00	

\$ 5.00 Certificate of Status (optional)

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SH GROUP OPERATIONS, L.L.C." 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 EIGHTEENTH DAY OF DECEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4643278 8300

121359904

jeffray W. Bullock, Secretary of State CATION: 0081079

DATE: 12-18-12