Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : NRAI CORPORATE SERVICES, INC. - IRVI

Account Number : I20080000054

Phone : (949)955-9585

Fax Number

: (800)562-6504

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Foreign Limited Liability Company MD7 Capital Three, LLC

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Estimated Charge	\$125.00					

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COVER LETTER

		CO	VER LEITER			
TO: Regi	stration Section					
Divis	sion of Corporations					
SUBJECT:	MD7 Capital Three LLC		•			
GOINDALT _		Name of Li	mited Liability Company			
	"Application by Foreign Limited I d check are submitted to register th					
Ploase return a	all correspondence concerning this	maiter to th	e following:			
	Emily Vincent					
		N	ame of Person	, <u>.</u>		
	NRAI Corporate Services, Inc.					
		F	irm/Company	****		
	2875 Michelle Dr., Suite 100		•		2012 DEC 19 SECRETARY TALLAHASSE	
			Address		DEC 19	-
	Irvine, CA 92606				19 \RY \$SE	
		City/S	tate and Zip Codc		E P	1
	cvincent@nrai.com				2007 2007 2007	دها ۱۹۹۱ع احسیدا
	E-mail addres	s: (to be use	d for future annual report no	tification)	10 A	
For further inf	ormetion concerning this matter, p	icase call:				
Emil	y Vincent		800 562-6 at ()	439	,	
	Name of Person	Are	a Code & Daytime Telephor	ne Number	-	
Divis Regis P.O. 1	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314	Divisio Regist Cliftor 2661 I	ET ADDRESS: on of Corporations ration Section a Building Executive Center Circle assee, FL 32301			
	a check for the following an 25.00 Filing Fee	iling Fee &	☐ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing I of Status & Cer		

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: MD7 Capital Three, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C., (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) 03/31/2009 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1700 E. Walnut Ave., Suite 400 El Segundo, CA 90245 (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 Landmark Dividend Management LLC, 1700 E. Walnut Ave., Suite 400, El Segundo, CA 90245 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, a translation of the conflictte under oath of the translation must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Acquisition and management of telecomm and bittineard ground less Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), P.S., the execution of this document constitutes an affirmation under the genalties 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.)

Jeffrey Knyal, Member of Landmark Dividend Management LUC, Member

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.

 The name of MD7 Capital Three 	the Limited Liability	y Company is:	
		d in the state of Florida is:	
2. The name and	I the Florida street a	ddress of the registered agent and office are:	
		NRAI Services, Inc. (Name)	2012 DEC SECRETA
	Florids, S	- SSEE	
	Taliahanses	FL 32301 City/State/Zip	AH & LO

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.

NRAI Services, Inc.

By:

(Signature) Jose Castellanos, Asst. Secret

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

5 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 "MD7 CAPITAL THREE, 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 NINETEENTH DAY OF DECEMBER, A.D. 2012.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MD7 CAPITAL"

THREE, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MARCH, A.D.

2009.

SECRETARY OF STATE

4671326 8300

121360851

AUTHENTY CATION: 0081790

DATE: 12-19-12

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