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To:

Division of Corporations

Fax Number

1 (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

1 (850) 222-1092

Fax Number

: (850)876-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Foreign Limited Liability Company NEW WORLD AVENUE BLDG A-1, LLC

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TO: Registration Division of	Section Corporations		,			
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SUBJECT:	/orld Avenue Bldg A-1, L					
		Name of Lim	ited Liability Company		-	
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Please return all corre	spondence concerning this	matter to the	followings			
Rita	Townsend					
		Na	me of Person			
Nov	v World Avenue Bldg A-1	,LLC				
		Fir	т/Сотрыпу			
3090	O Olive Street, Suite 300					
		····	Address .		 _	
Dall	as, TX 75219					
		City/St	ate and Zip Code			
		RITA.TO	HI @COSENUK	LLWOD.COM		
	B-mail addre		for future annual report			
or further informatio	n concerning this matter, p	olease call:		•		
Rita Townsond			972 201	-2869	SECRETARY ALLAHASSE 	2013 MAR I I
	Name of Person	Area	Code & Daytime Talepi	none Number	— AR	Á
MAILING A		STREE	T ADDRESS:		1.5.R	_
Division of Corporations		Division of Corporations				
Registration Section P.O. Box 6327 Taliahassee, FL 32314		Registration Section			ଳ୍କ	2>
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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: New World Ayenue Bldg A-1, 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 sonsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 2/28/2013 (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 3090 Olive Street, Suite 300, Dallas, TX 75219 (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: JCCC Development Project, LLC 3090 Olive Street, Suite 300, Dallas, TX 75219 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having outstody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixed a 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; Any and all transactions which limited liability companies can register to do business in Florida. 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.) STEPHEN D. PARKER

FL817 - 12/03/2012 Walters Kluwer Online

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.

If unavailabl	e, the alternate to be used	d in the state of Florida is:		
2. The name	and the Florida street ac	idress of the registered agent and office are:	, <u>***</u> , <u>**</u>	
		C T Corporation System		
		(Name)		
	÷	1200 South Pine Island Road		
	Plorida Su	reet Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324		
		City/State/Zip		
liability comp registered ag statutes relati	cany at the place designati ent and agree to act in th ing to the proper and con	nt and to accept service of process for the abouted in this certificate, I hereby accept the appois capacity. I further agree to comply with the appoint performance of my duties, and I am fails registered agent as provided for in Chapter	ointment as e provisions af all niliar with and	2013 MAR I

(Signature)

Michael E. Johnson
Accluded O. J. S.

\$ 100,00 Filing Fee for Application
\$ 25,00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

FLETT - 17/03/2011 William Klewer College

Delaware

PACE !

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "NEW WORLD AVENUE BLDG A-1, 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 EIGHTH DAY OF MARCH, A.D. 2013.

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

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130294548

You may verify this certificate online at carp. deleware.gov/authver.shtml

FILED

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ECRETARY OF STATE
LEAHASSEE FLORIDA

AUTHENTICATION: 0270238

DATE: 03-08-13