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DEFARINENT OF STATE DIVISION OF CORPORATION

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on benefice bowlant					
	ACCOUNT NO.	:	I20000001	95	
	REFERENCE	:		7917635	
A	UTHORIZATION	:	Spell of	ena	
	COST LIMIT	: 	\$ 125.00		
ORDER DATE : Jun	e 18, 2013				
ORDER TIME : 9:	47 AM .	**	PLEASE FILE	2ND*	
ORDER NO. : 692	693-200				
CUSTOMER NO:	7917635				
	FOREIGN F	ILII	NGS	·	
NAME:	ARCTIC CITRUS	LL	C		28
XXXX QUALIFICATION (TYPE: LL)					IJUN 20
PLEASE RETURN THE	FOLLOWING AS	PRO	OOF OF FILI	NG:	THE PERSON IN TH
CERTIFIED XX PLAIN STA CERTIFICA		and:	ING		AM 10: 32 SEEFFILORIDA
CONTACT PERSON:	Susie Knight -	I	EXT# 52956		
		I	EXAMINER:		

COVER LETTER

n by Foreign Limited L submitted to register th	Name of Limited Liability Company Liability Company for Authorization to Transact Business in Floe above referenced foreign limited liability company to transact matter to the following:	
submitted to register the	e above referenced foreign limited liability company to transact	
-	matter to the following:	
Goebel		
	Name of Person	
Bay Property Corp.		~
	Firm/Company	
rlson Parkway, Sui	ite 250	
	Address	_
onka, MN 55305		
	City/State and Zip Code	
silvebaymgmt.com	1	WIN JUN 20 SECRETARY FALLWAHASS
E-mail address	s: (to be used for future annual report notification)	
ncerning this matter, p	elease call:	[LL]
	at (952) 358-4494	AM IO: 37
Name of Person	Area Code & Daytime Telephone Number	1.0: 32 STATE LORIDA -
orations ion	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	0 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	esilvebaymgmt.com E-mail address concerning this matter, p Name of Person DRESS: corations cion 32314 or the following am	Address tonka, MN 55305 City/State and Zip Code Silvebaymgmt.com E-mail address: (to be used for future annual report notification) oncerning this matter, please call: at (952 358-4494 Name of Person Area Code & Daytime Telephone Number DRESS: Orations Division of Corporations Registration Section Clifton Building 32314 2661 Executive Center Circle

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 FUNDING.

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. Arctic Citrus LLC		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.E.C.," or "LLC	'.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limite Company," "L.L.C," "LLC.")		
2. Delaware 3. 27-2189498		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. June 12, 2013 5. perpetual		
(Date of Organization) (Duration: Year limited liability company will c exist or "perpetual")	ease to	
6		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 601 Carlson Parkway, Suite 250	<u> D:n</u>	201
Minnetonka, MN 55305		دع کے
(Street Address of Principal Office)	大力	JUN 20
8. If limited liability company is a manager-managed company, check here	RY OF	
9. The name and usual business addresses of the managing members or managers are as follows:	STATE	AM 10: 32
Cool Willow LLC, sole member	NG NG	32
601 Carlson Parkway, Suite 250		
Minnetonka, MN 55305		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo 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 eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida:		ords in
Residential Real Estate	 -	
Chys: Satt		
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		
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F		
Christine Battist, Chief Financial Officer for sole 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.

1. The name	of the Limited Liability C	Company is:			
Arctic Citrus	LLC				
lf unavailable	e, the alternate to be used	in the state of Florida is:			
2. The name	and the Florida street add	dress of the registered agent and office are:			
	Corporation Service Company (Name)				
1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)			CRETAR EAHAS	2013 JUN 20	
	Tallahassee	FL 32301 City/State/Zip	Y OF STATE See Florid) AM 10:	
		Спутанастир	ATE RIDA	သ	

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,

Sue G. Knight

(Signature)

Assistant Vice President

\$ 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 "ARCTIC CITRUS 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 JUNE, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARCTIC CITRUS LLC" WAS FORMED ON THE TWELFTH DAY OF JUNE, A.D. 2013.

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

5349974 8300

130793582

AUTHENTY CATION: 0525124

DATE: 06-19-13

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