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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone Fax Number : (850)222-1092 : (850)878-5368

\*\*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 CITY VIEW MANAGING CO., LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

J. SAULSBERRY EXAMINER

JUL 10 2013

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Help

CR2E027 (9/10	0)	COVI	er letter		
	gistration Section rigion of Corporations				
SUBJECT:	City View Managing (	Co., LLC			
		Name of Lim	ited Linbility Company		
The enclosed Existence, at	d "Application by Foreignd check are submitted t	gn Limited Liability Comp to register the above refer	eany for Authorization to Transced foreign limited liability	mact Business in Florida," ( company to transact busine	Certificate of uss in Florida
Please return	n)) correspondence cor	ncerning this matter to the	following:	•	
	Louise D. Hamiel			•	
		Na	me of Person		
	Harbor Group Inte	rnstional			T ~
	<del></del>	Fli	пи/Сотрыту		
	999 Wateralde Dri	ive, Suite 2300			ZHI JUL -Y
	<del></del>	<del></del>	Address	· <u> </u>	- (J.)
	Norfolk, VA 2351	o			~ (S)
		City/8t	ate and Zip Code		Am or 4.1 Froring
	lhamlel@harborg.c	om			
	E	mail address: (to be used	for future annual report not	fication)	<b>—</b>
Por further is	information concerning t	his matter, picase call:			
Lo	uiso D. Hamlel		757 961-20	43	
-	Nuncof	Person Area	Code & Daytime Telephon	Number	
Div Reg P.O	ALING ADDRESS: vision of Corporations gistration Section . Hox 6327 lahassee, FL 323   4	Division Registri Cilifon 2661 Bi	T ADDRESS: n of Corporations ation Section Building eccutive Center Circle sece, FL 32301		
	s a check for the fol \$125.00 Filing Fee	lowing amount: I \$130.00 Filing Fee & Certificate of Status	C) \$155.00 Filing Pec & Certified Copy	☐ \$160.00 Filing Fee, Car of Status & Certified C	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO RECESTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSIN	ESS IN THE STATE OF FLORIDA:	
1. City View Managing Co., LLC		
(Name of Foreign Limited Liability Company;	must include "Limited Liability Company," "L.L.C.," or "L.C.	")
consent of the managers or managing members adopt Company," "LLC," "LLC.")	r the purpose of transacting business in Plorida and attach a copying the alternate name. The alternate name must include "Limited	of the written d Liability
2. Dolaware	3. 90-1002112	<del></del>
(Jurisdiction under the law of which foreign limited company is organized)	Hability (FBI number, if applicable)	
4, 7-3-2013	5. Perpstual	
(Date of Organization)	(Duration: Year Ilmlied liability company will of exist or "perpetual")	F (3)
6. Upon Qualification		- 4
	iness in Florida, if prior to registration.) 08.502 F.S. to determine penalty liability)	
7 999 Waterside Drive, Suite 2300, Norfolk, VA 2	3510	Section 1
(Stre	et Address of Principal Office)	
6 76H 2 711 1115		STATE LORIO
8. If limited liability company is a manager-	managed company, check here [X]	<b>⇒</b> ™ I
9. The name and usual business addresses of	f the managing members or managers are as follows:	
T. Richard Litton, Jr., Manager of City View	Managing CD.,LIC	
999 Waterside Drive, Suite 2300		
Norfolk, VA 23510		
the jurisdiction under the law of which it is organized. ( translation of the certificate under eath of the translator of	ore than 90 days old, duly authenticated by the official having cust A photocopy is not acceptable. If the certificate is in a fixelgral and must be submitted.)  ducted or promoted in Florida:	guege, a
		·
/	Y	
	or an authorized representative of a member.	•
penalties of perjury that the facts stated h	.5., the execution of this document constinues an affirmation under the crein are true. I am sware that any false information submitted in constitutes a third degree felony as provided for in 3.817.155, P	a
•	inger of City View Managing Co., U.C.	··· •
<del></del>	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.

City View Manag	<del></del>			
If unavailable,	the alternate to be use	d in the state of Florida is:	,	
2. The name a	and the Florida street a	idress of the registered agent and office are;	<del></del>	
		C T Corporation System (Name)	2013 JUL 2833 JUL 1411 AAA	-
·		1200 South Pine Island Road	1788 TURY   1988	1 1
,		rect Address (P.O. Box NOT ACCEPTABLE)	<b>.</b> .	<b>~~</b> .
	Plantation	FL 33324 City/State/Zip	PRIDA	,

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.

By (Signature)

Marc St. Pierre
Vice President and Assistant Secretary

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

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

DAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CITY VIEW MANAGING CO., 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 JULY, A.D. 2013.

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

2019 JUL -9 AH & WI

5361301 8300

130855254

You may verify this certificate online at corp.dalaware.gov/authver.shtmi

AUTHENTY CATION: 0568353

DATE: 07-08-13