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TO ACKNOWLEDGE

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	ACCOUNT NO.	: I200	000001	.95		
	REFERENCE	: 7687	\ / / .	7201231		
	AUTHORIZATION	: Cana	elDECe	man		
	COST LIMIT	: \$ 15	5.00			
ORDER DATE :	August 19, 2013					
ORDER TIME :	3:41 PM					
ORDER NO. :	768785-005					
CUSTOMER NO:	7201231					
	FOREIGN F	ILINGS				
NAME:	SKY ONE HOLDI	NGS, LLC				
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XXXX QUALIFICATION (TYPE: <u>LL</u>)		تت حدث	
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PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	ASSE ASSE	19	ji Armen
XX CERTIFIED COPY	OF S	3	Estrated Facilities
PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	ORIDA	1: 0:	عير المالية ا
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CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

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: Sky One Holdings, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC,") ₂ Delaware (PEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) June 28, 2013 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") Upon filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 355 South Grand Avenue, Suite 1750 Los Angeles, CA 90071 (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: Robert Campbell 355 South Grand Avenue, Suite 1750 Los Angeles, CA 90071 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 certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful business.

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 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.)

Robert Campbell

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.

	Holdings, LLC	any is:				
If unavailable, the alternate to be used in the state of Florida is:						
2. The name an	d the Florida street address o	of the registered	i agent and office are:	201.00	29	
	Corporation Ser	vice Con	npany	PC	2013 A	
		(Name)		至高	AUG	Checkers.
	1201 HAYS STREE	T		SSE	9	in market in
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				AM II:	*************************
	TALLAHASSEE	FL	32301	STATE LORIDE	1:05	. Krasti
		City/State/Zip				

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.

Sue G Knight
Assistant Value 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

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SKY ONE HOLDINGS, 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 TWENTY-NINTH DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SKY ONE HOLDINGS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2013.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 0623367

DATE: 07-29-13

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