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COVER LETTER

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	ation Section n of Corporations					
JS SUBJECT:	SNT FLORIDA, LLC, an Indiana limited liability company					
	Name of Limited Liability Company					
	application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of heck are submitted to register the above referenced foreign limited liability company to transact business in Florida					
Please return all	correspondence concerning this matter to the following:					
	Nicholas L. Tuttle					
	Name of Person					
	JSNT Real Estate, LLC					
	Firm/Company					
	9930 EAST 56TH STREET					
	Address					
	INDIANAPOLIS, INDIANA 46236					
	City/State and Zip Code					
ntuttle@quintecusa.com						
	E-mail address: (to be used for future annual report notification)					
For further infor	mation concerning this matter, please call:					
Nic	cholas L. Tuttle 317 803-8000					
	Name of Person Area Code & Daytime Telephone Number					
Divisio Registr P.O. Bo	ING ADDRESS: n of Corporations ation Section Division of Corporations Registration Section Clifton Building Sessee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					
	check for the following amount: 5.00 Filing Fee ■ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy					

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:

1.	JSNT FLORIDA, LLC, AN INDIANA LIMITED LIABILITY COMPANY
•••	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
con	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written isent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C," "LLC.")
ا ر	INDIANA 3
	Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4	AUGUST 13, 2013 _{5.} PERPETUAL
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	9930 East 56TH ST
	Indianapolis, Indiana 46236
	(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:
	JSNT Real Estate, LLC, its sole member
	9930 EAST 56TH STREET
	INDIANAPOLIS, IN 46236
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a solution 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 businesses of any nature
	permitted to be conducted or carried on by a limited liability company authorized to do business under the laws of the State of 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.)

Sierra H. Bunnell, Indiana Bar Member, as counsel for JSNT Florida, LLC

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.

	of the Limited Liability C	ompany is:	
If unavailable	, the alternate to be used i	n the state of Florida is:	
2. The name	and the Florida street add	ress of the registered agent and office are:	
	C T Corporat	ion System	
	- ,	(Name)	
1200 South Pine Island Road			
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	
	Plantation	_{FL} 33324	
		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.

Sierra Burris
Vice President & Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

JSNT FLORIDA, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on August 13, 2013, and was in existence or authorized to transact business in the State of Indiana on August 15, 2013.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fifteenth Day of August, 2013.

Corrie Lawson

Connie Lawson, Secretary of State

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