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COVER LETTER

	sistration Section ision of Corporations					alus di	
	Value Place Ft Myers	FL Southe	ast LLC				නි <u>~</u>
SUBJECT:		Name of Limited	d Liability Com	pany			JG 2
	d "Application by Foreign Limited and check are submitted to register t						
Please return	all correspondence concerning thi	s matter to the fo	llowing:				կ։ 2
	Kathleen R. Leal						
		Name	of Person				
	Foulston Siefkin L	LP					
		Firm/	Company				
	1551 N Waterfront	Parkway, S	Suite 100				
	•	A	ddress			· · · · · · ·	
	Wichita, KS 67	206					
	· · · · · · · · · · · · · · · · · · ·	City/State	and Zip Code				
	jwallace@valuep	lace.com					
	E-mail addre	ess: (to be used fo	r future annual	report noti	fication)		
For further in	nformation concerning this matter,	please call:					
Ka	Kathleen R Leal		316	ຸ 291-	9787		
	Name of Person	Area Co	ode & Daytime	Telephone	Number		
Div Reg P.O	ision of Corporations gistration Section b. Box 6327 Jahassee, FL 32314	Division o Registratio Clifton Bu 2661 Exec		rcle			
			■ \$155.00 Filir Certified Co		□ \$160.00 Filing of Status & Co		

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.	Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.	I.C.")		
cor	If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Lir Company," "L.L.C," "LLC.")	copy of t	he wri	tten
	2. Kansas (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)			
	July 29, 2013 _{5.} Perpetual			
4.	(Date of Organization) (Date of Organization) (Duration: Year limited liability company we exist or "perpetual")	ill cease	to	
6.	5.		ಪ	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		AUG	
7.	8621 E 21st Street North, Suite 250, Wichita, KS 67206	报 最初	22	
		शेर्व दुर्हे उन	3	
	(Street Address of Principal Office)	25	-	No. of
8.	. If limited liability company is a manager-managed company, check here		2	
9.	. The name and usual business addresses of the managing members or managers are as follow	/s:		
	Value Place LLC			
	8621 E 21st Street North, Suite 250	1 11 - 12		
	Wichita, KS 67206			
the	O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having a le jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign anslation of the certificate under oath of the translator must be submitted.)	-		ds in
11.	1. Nature of business or purposes to be conducted or promoted in Florida: To engage in any a	ct or		
-	activity for which limited liability companies may be organized under the Florida Limited Liability Company Act a effect or hereafter amended or modified.	as now in	·	
	Malley			
	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 penalties of perjury that the facts stated herein are true. Lam aware that any false information submittee			

Typed or printed name of signee

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Kyle Rogg, COO of VP Property Holdings LLC, Member

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 L	iability Comp	pany is:			
Value Place Ft Myer	s FL Sout	theast_LLC			
If unavailable, the alternate to	be used in the	e state of Florida is:			
2. The name and the Florida s	street address	of the registered agent and office are:		ह	_
	CT	Corporation System	्रोट हुँ हो। विकास	Ð	er parigram
		(Name)		22 75	To the same
1200 South Pine Island Road			10 m	3	F
FI	orida Street Add	ress (P.O. Box <u>NOT</u> ACCEPTABLE)		4:21	U
·	Plantation	FI. ³³³²⁴	, a significant		
	· · · · · · · · · · · · · · · · · · ·	City/State/Zip	_		
liability company at the place d agent and agree to act in this co relating to the proper and comp obligations of my position as re CT Corporation System By:	esignated in the apacity. I furtholete performation is gistered agent	o accept service of process for the above his certificate, I hereby accept the appoin her agree to comply with the provisions on the confluence of my duties, and I am familiar with the provided for in Chapter 608, Florida	tment as of all stati and accep	regisi ites	tered
(Signature) Katherine Lackey, Asst.	Secy.				
	\$ 100.00	Filing Fee for Application			
	\$ 25.00	Designation of Registered Agent			•
	\$ 30.00	Certified Copy (optional)			

\$ 5.00 Certificate of Status (optional)

13 AUG 22 RM 4: 21

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6970842

Entity Name: VALUE PLACE FT MYERS FL SOUTHEAST LLC

Entity Type: KANSAS LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: HARVEY R. SORENSEN

Registered Office: 1551 N Waterfront Parkway Suite 100, WICHITA, KS 67206

was filed in this office on July 29, 2013, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of August 20, 2013

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 584114 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.