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#### COVER LETTER

		COVER LETTER			
	stration Section sion of Corporations				
SUBJECT:	Income Holdings II, LLC, a	a Delaware limited liability company			
BCBGECT.	Nam	e of Limited Liability Company	•		
		ity Company for Authorization to Transact Business in ove referenced foreign limited liability company to tran			
Please return	all correspondence concerning this matt	er to the following:			
	Paul Morton				
		Name of Person			
		Firm/Company			
	2637 E. Atlantic	Blvd. #26913		21	
		Address		WANTION OF THE STATE OF THE STA	ARRIE A
	Pompano Beach	n, FL 33062	int:		A RU ANGEL
		City/State and Zip Code	<del>XX</del>	ထ	, <u>-</u>
	pfmiii@gmail.cor	n	ing Sir. Est on	10	et enco
		be used for future annual report notification)	44.	<b>₩</b>	Mary A
For further in	formation concerning this matter, please	call:	Hames 3	CIN	
J۱	ustin G. Cerrato	at (904 ) 373-3174			
	Name of Person	Area Code & Daytime Telephone Number			
Div Reg P.O	sion of Corporations stration Section Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	a check for the following amoun 125.00 Filing Fee \$130.00 Filing Certificate of S	Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing			

#### 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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
Income Holdings II, 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 an consent of the managers or managing members adopting the alternate name. The alternate name must in Company," "L.L.C," "LLC.")		
2. Delaware 3. 46-2087728		
(Jurisdiction under the law of which foreign limited liability (FEI number, if appli company is organized)	cable)	-
<sub>5.</sub> Perpetual		
(Date of Organization) (Duration: Year limited liability c exist or "perpetual")	ompany will cease to	-
<sub>i.</sub> 10/3/13		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	200	-
2637 E. Atlantic Blvd. #26913	In The Carlo	*****
Pompano Beach, FL 33062	\$37 141 8- A	****
(Street Address of Principal Office)	Me -	- :
. If limited liability company is a manager-managed company, check here		£ 7
. The name and usual business addresses of the managing members or managers are	as follows:	
Paul Morton		
		-
		-
O Associated in an existing and Gross of suitaness on more than 00 days and dayless absorbed by the office	in he in a man d	-
<ol><li>Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offic in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in</li></ol>		
anslation of the certificate under outh of the translator must be submitted.)		
1. Nature of business or purposes to be conducted or promoted in Florida: Real E	state Holdings	<u>-</u>
		<b>~</b> ·
Signature of a member or an authorized representative of a mem		
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affire penalties of perjury that the facts stated herein are true. I am aware that any false information		
document to the Department of State constitutes a third degree felony as provided for i		

Typed or printed name of signee

Paul Morton

#### 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 Company is
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#### Income Holdings II, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

# Hathaway & Reynolds, P.A. (Name) 50 A1A North, Suite 108 Florida Street Address (P.O. Box NOT ACCEPTABLE) Ponte Vedra Beach 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.

(Signature)

\$ 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 "INCOME HOLDINGS II 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 TWELFTH DAY OF OCTOBER, A.D. 2013.

5291786 8300

131180498

AUTHENTYCATION: 0810249

DATE: 10-12-13

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