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January 14, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT

SUBJECT: FOSR RE LLC REF: W14000002479

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SECRETARY OF STATE
ALLAHASSEE RIORIDA

RE-SUBMIT
Please retain original fling
date of submission 1/2/14

P.O BOX 6327 - Tallahassee, Florida 32314

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

IN COMPLIANCE WITH SECTION 605.0907, FLORIDA STATUTES, THE FOLLOWING IS SUMMITTED TO REGISTER A FOLLOWING IS SUMMITTED TO REGISTER A FOLLOWIND LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THIS STATE OF FLORIDA:	REIGN		
1. FQSR RB-LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company;" "L.L.C.," or "LLC.")			
(If nome unavoliable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the we consent of the managers or managing members adopting the alternate name must include "Limited Liability Company," "L.L.C." "LLC.")	ritten f		
2. Delawaré g. 46-4453412		•	
(Jurisdiction under the law of which foreign limited liability (FHI number, if applicable) company is organized)			
4			
(Date first (minsacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine pennity liability)			
5. 450 South Omnge Avenue, Sulte 900, Oriendo, FL 32801		2014	
		JAN	
(Street Address of Principal Office)		۱	}
6. 450 South Orange Avenue, Suite 900, Orlando, FL 32801		Ć	· [
		=	Ċ
(Mailing Address)	53	œ	
· · · · · · · · · · · · · · · · · · ·	골함	F -	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/fire:	27	Q)	
Julian E. Whitehurst, President; Christopher P. Tossitore, Executive Vice President and Secretary; Paul E. Hayer, Executive			
Vice President; Kévin B. Habicht, Executive Vice President and Assistant Secretary			
all at 450 South Orange Ayenus; Sylip 90Q, Oclando, Ft. 32801			
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official lawing custody of reconing the certificate in the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a lawing rays, a translation of the certificate is made only of the translation must be submitted.)	tis		
Signature of an authorized person.			
(In accordance with section 603.020), P.S., the execution of this document constitutes an affirmation under the problem of pulluration and the facts stated herein are true, I am aware that any falso information submitted in a document to the Department of State constitutes a third degree fellony as provided for in 2.817.155, P.S.)———————————————————————————————————			
Christopher P. Tessilore			

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED

FQSR RELLC					
If unavailable, the alternate to be used in the state of Florida is:					
	,				
. The nam	ne and the Florida street a	ddress of the registered agent and office are:			
	C T Corporation System	n			
		(Name)	Fig		
	1200 South Pine Island				
	Plorida S	treet Address (P.O. Box NOT ACCEPTABLE)	골		
	Plantailon	FL 33324 Chy/Stute/Zip	7.7		
		Cny/suite/2/p	•		
ability com egistered o atues rela	npany at the place designs gent and agree to act in ti iting to the proper and col	ent and to accept service of process for the above stated limitated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of implete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, Florida	rali		
	CT Corporation Sy	Angel Nunez (Signature) Assistant Secre			
	š :	100.00 Filing Fee for Application			

\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

COVER LETTER

SUBJECT: PQSR RELLC	
	Name of Limited Linbility Company
The enclosed "Application by Foreign Limi Existence, and check are submitted to regist	ted Liability Company for Authorization to Transact Business in Florida," Cortificate of ter the above referenced foreign limited liability company to transact business in Florid
Please return all correspondence concerning	; this matter to the following:
	Name of Person
	Plrm/Company
	Address
	City/State and Zip Code
IS-mail ed	ldress: (to be used for litture annual report notification)
For further information concerning this max	er, please cali:
	a1 (
Name of Person	Area Code Dayline Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section	STREET ADDRESS: Division of Corporations Registration Section
P.O. Hox 6327 Tallphassee, FL 32314	Cition Building 2661 Executive Center Circle Tellalmszee, FL 32301
Buclosed is a check for the following ©\$123.00 Filing Fee \$130.0	r amount: 00 Filing Fee & Siss.00 Filing Fee & Si60.00 Filing Fee, Carlificate leate of Status Carlified Copy of Status & Carlified Copy

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FQSR RE 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 JANUARY, A.D. 2014.

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

5461129 8300

140021267

You may verify this cortificate online at corp.delaware.com/euthyor.ahtml

Jeffrey W. Bullock, Secretary of State

DATE: 01-08-14