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NAME:

MRH SUB 1, LLC

TYPE OF FILING: APPLICATION

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125.00

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	egistration Section ivision of Corporations					
SUBJECT	: MRH SUB I, LLC					
	Nam	e of Limited Liability Compa	any			
The enclose Existence,	ed "Application by Foreign Limited Liabil and check are submitted to register the abo	ity Company for Authorizations referenced foreign limited	on to Transact Business in Florida," Certificate of d liability company to transact business in Florida			
Please retu	rn all correspondence concerning this matt	er to the following:				
	APRIL SMITH					
Name of Person						
	Mariners Companies					
	Firm/Company					
	220 Newport Center Dr, # 11-598					
Address						
Newport Beach, CA 92660						
· City/State and Zip Code						
april@marinerscompanies.com						
E-mail address: (to be used for future annual report notification)						
For further	r information concerning this matter, please	e call:				
Α	April Smith	at (949) 274-8369 Daytime Telephone Number			
***	Name of Person	Arca Code	Daytime Telephone Number			
D R P.	MAILING ADDRESS: Division of Corporations Legistration Section LO. Box 6327 Callahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	cle			
	is a check for the following amour \$1\$125.00 Filing Fee \$130.00 Filing Certificate of \$1	Fee & \$155.00 Filing	•			

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

IN COMPLIANCE WITH SECTION 605.0902. FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. MRH SUB I, 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 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Upon Filing (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 220 NEWPORT CENTER DRIVE, SUITE 11-598 NEWPORT BEACH, CA 92660 (Street Address of Principal Office) 6, 220 NEWPORT CENTER DRIVE, SUITE 11-598 NEWPORT BEACH, CA 92660 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: MARINERS REPUBLIC HOLDINGS, LLC, MANAGER 220 NEWPORT CENTER DRIVE, SUITE 11-598, NEWPORT BEACH, CA 92660 8. 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.)

Signature of an authorized person

(In accordance with section 605.0203, 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.)

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 FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liability Compa	iny is:		
MRH SUB I,	LLC			
If unavailable,	the alternate to be used in the	state of Florida	is:	
2. The name a	and the Florida street address o	f the registered	agent and office are:	
	National Cor	porate Research	ı, Ltd., Inc.	
		(Name)		
	155 Florida Street Add	Office Plaza Driv		
	Tionga Street Add	1055 (1 .0. 1) 6601	ACCELIABLE)	
	Tallahassee	FL City/State/Zip	32301	
	•	City/state/Zip		
liability compa registered ager statutes relatin	amed as registered agent and to any at the place designated in the nt and agree to act in this capang to the proper and complete programmers of my position as registed.	his certificate, I h city. I further ag verformance of m tered agent as pr	nereby accept the app gree to comply with th y duties, and I am fan	ointment as we provisions of all miliar with and r 605, Florida
	(Signa			
	\$ 100.00 \$ 25.00	Filing Fee for Designation o	Application f Registered Agent	
	\$ 30.00	Certified Cop	y (optional)	

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MRH SUB I 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 FOURTEENTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MRH SUB I LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2013.

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

5422440 8300

140181537

AUTHENTY CATION: 1136322

DATE: 02-14-14

You may verify this cortificate online at corp.dolaware.gov/authver.shtml