Florida Department of State

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To;

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

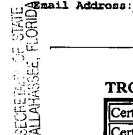
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Foreign Limited Liability Company TROON FL LEASING COMPANY II. LLC

Certificate of Status	1
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Corporate Filing Menu

Help

COVER LETTER

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TO: Reg	istration Section	
	sion of Corporations	
SUBJECT:	TROON FL LEASING	COMPANY II, LLC
	Nam	e of Limited Liability Company
The enclosed Existence, an	"Application by Poreign Limited Linb d check are submitted to register the al	ility Company for Authorization to Transact Business in Florida," Certificate of cove referenced foreign limited liability company to transact business in Florida
Please return	all correspondence concerning this ma	tter to the following:
	Kathryn A. Wong	
	· · · · · · · · · · · · · · · · · · ·	Name of Person
	Troon Golf, L.L.C.	
		Pim/Company
	15044 N. Scottsdale	
		Address
	Scottsdale, Arizona	85254
		City/State and Zip Code
	kwong@troongolf.co	om .
	E-mail address:	(to be used for future annual report notification)
For further in	formation concerning this matter, pleas	se call:
	Kathryn A. Wong	at / 480 \ 477-0476
	Name of Contact Person	Ares Code Daytimo Telephone Number
Divi Regi P.O.	ILING ADDRESS: sion of Corporations istration Section Box 6327 shassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	a check for the following amou 125.00 Filing Fee S \$130,00 Filing Certificate of	g Fee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate

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

Annual Company of the Company of the

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 51 ORIDA:

1. TROON FL LEASING COMPANY II, LLC	<u> </u>	_
(Name of Foreign Limited Liability Company; must include "Limited Liability Company;	any," "L.L.C.," or "LLC.")	_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida Liability Company," "L.L.C," or "LLC.")	. The alternate name must include "Lis	nited
2. Delaware 3.		
(Jurisdiction under the law of which foreign limited liability (FEI company is organized)	number, if applicable)	-
4	السب ح ع د الم	≌
(Date first transacted business in Florida, if prior to registratio (See sections 605,0904 & 605,0905, P.S. to determine penalty lis		
5	មិន ដ	20 ,
15044 N. Scottsdale Road - Suite 300, Scottsdale, Arizona 85254	\$0.23 m = 1	- -
(Street Address of Principal Office)		7
6. Same as above	اران الله الله الله الله الله الله الله ال	22.
	7.7 gran	<u>@</u>
(Mailing Address)	***	-
7. The name, title or capacity and address of the person(s) who has/have a Timothy S. Schantz, EVP	uthority to manage is/are:	_
15044 N. Scottsdale Road - Suite 300		-
Scottsdale, Arizona 85254		_
8. Attached is an original certificate of existence, no more than 90 days old, having custody of records in the jurisdiction under the law of which it is orgacceptable. If the certificate is in a foreign language, a translation of the cermust be submitted)	ganized. (A photocopy is not	
Signature of an authorized person (In accordance with section 605.0103, F.S., the execution of this document constitutes an affirmation under the am aware that any false information submitted in a document to the Department of State constitutes a bland degree	nenalties of perjusy that the facts stated here he felony as provided for in 1,817,155, P.S.)	ein ere true, i
Kaihryn A. Wong		
Typed or printed name of signee		

response to the continues of the continues of

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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 o	f the Limited Liability	Company is:		
TROON	PL LEASING COMPANY	Y II, LLC		
If unavailable,	the alternate to be use	d in the state of Florida is;		
2. The name a	nd the Florida street ac	ddress of the registered agent and office are:	2014 APR	
	C T Corporation System	1	经商品 []	
		(Name)	55 8	П
	1200 South Pine Island	Road		,
	Florida St	treet Address (P.O. Box NOT ACCEPTABLE)	51ATE 41	بره اکست
	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 605, Florida Statutes.

C T Corporation	System Cannia Bengan	<u>Connie</u> Bryan
Бу:	(Signature)	Assistant Secretary
		- 1990 PERM Taking or on A

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

Delaware

D3.68 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TROON FL LEASING COMPANY 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 EIGHTH DAY OF APRIL, A.D. 2014.

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

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140440559

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

Jeffrey W. Bullock, Secretary of State

DATE: 04-08-14