M14000002647

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



900257132659

2014 APR 17 PM 12: 13
SECRETARY OF STATE
FALL MIASSEE FI ORDA

DEPARTMENT OF STATE



| ACCOUNT NO. | : | 12000000195 | |
|-------------|---|-------------|---------|
| REFERENCE | : | 097456 | 7185856 |

AUTHORIZATION

COST LIMIT : /\$\125.00

ORDER DATE : April 16, 2014

ORDER TIME : 10:02 AM

ORDER NO. : 097456-030

CUSTOMER NO: 7185856

FOREIGN FILINGS

NAME: RGN-JACKSONVILLE IV, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 52925

EXAMINER:

COVER LETTER

TO: Registration Section

Division of Corporations

RGN-Jacksonville IV, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Michelle Hargis

Name of Person

RGN-Jacksonville IV, LLC

Firm/Company

15305 Dallas Parkway, Suite 400

Address

Addison, TX 75001

City/State and Zip Code

michelle.hargis@regus.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Hargis

Name of Contact Person

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee □ \$130.00 Filing Fee &

☐ \$155.00 Filing Fee. &.__

☐ \$160.00 Filing Fee, Certificate

Certificate of Status

Certified Copy

of Status & Certified Copy

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

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:

| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include Liability Company," "L.L.C," or "LLC.") | ude "Limited |
|--|--------------|
| _{2.} Delaware | |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | |
| 4 | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) | |
| _{5.} 15305 Dallas Parkway, Suite 400 | 三三 2 |
| Addison, TX 75001 | 基图 |
| (Street Address of Principal Office) | |
| _{6.} 15305 Dallas Parkway, Suite 400 | |
| Addison, TX 75001 | |
| (Mailing Address) | 景温 2 |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ar | e: |
| Regus Corporation, Sole Member | |
| 15305 Dallas Parkway, Suite 400 | |
| Addison, TX 75001 | |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is | |

(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.)

Michael J. Osburn

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.

| | e of the Limited Liability Conville IV, LLC | ompany is: | |
|--|---|---|---|
| If unavailab | le, the alternate to be used i | n the state of Florida is: | |
| 2. The name | e and the Florida street add | ress of the registered agent and office are: | |
| | Corporation Service Cor | npany | 2914 AF |
| (Name) | | APR I | |
| | 1201 Hays Street | | 7 7 |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | | F ST 5 | |
| | Tallahassee | 32301 FL | REAL TO |
| | | City/State/Zip | - |
| liability com registered as statutes rela | pany at the place designated gent and agree to act in this ting to the proper and comp bligations of my position as Corporation Service Comp By: | and to accept service of process for the abod in this certificate, I hereby accept the appocapacity. I further agree to comply with the lete performance of my duties, and I am famoregistered agent as provided for in Chapter | ointment as e provisions of all niliar with and |

\$ 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 "RGN-JACKSONVILLE IV, 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 SEVENTEENTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID

"RGN-JACKSONVILLE IV, LLC" WAS FORMED ON THE SIXTEENTH DAY OF

APRIL, A.D. 2014.

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

5517679 8300

140483606

Jeffrey W Bullock, Secretary of State AUTHENTICATION: 1300730

DATE: 04-17-14

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