

Florida Department of State

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Foreign Limited Liability Company ECLIPSE GRACE TENTH AVENUE, LLC

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4/25/2014

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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:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of "LLC.")		
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LI.C.")		
2. Delaware 3. 32-0437022		
(Jurisdiction under the law of which foreign limited liability (PHI number, if applicable) company is organized)		
4. upon qualification		
(Date lirst transacted business in Platida, if prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty ilability)	2814	
5. 3820 Mansell Road, Suite 280	APR	-
Alpharetta, GA 30022	₹ 	
(Street Address of Principal Office)	5	m
6. same	3	Ü
(Malling Address)	چ 2	
•	7	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:		
Christina K. Firth - Authorized Person		
c/o FC Eclipse Investment, LLC, 3820 Mansell Road, Suite 280		
Alpharetta, GA 30022		
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 accordance in 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 Go accordance with section 605,020, P.S., the execution of this document constitutes an affirmation under the penaltics of perjuty that the facts stated herein are to an aware that any falls information submitted in a document to the Department of Sinte constitutes a third degree falony as provided for in a.817.135, P.S.)		
Christina K Firth		

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 the L	mited Liability Company is:	
Eclipse Grace Tenth Aver	ue, LLC	·····
If unavailable, the alte	mate to be used in the state of Florida is:	
2. The name and the	Florida street address of the registered agent and office are:	
стс	orporation System	
	(Nаше)	量量五
1200	South Pine Island Road	Z5 ASSE
<u></u>	Florida Street Address (P.O. Box NOT ACCEPTABLE)	mg & C
Plants	tion FL 33324	25 9
-	City/State/Zip	ATE ARIDA

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.P.Corporation System

By: (Signature)

Kathryn A. Widdoes, Asst. Secretary

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

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ECLIPSE GRACE TENTH AVENUE, 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 TWENTY-FIFTH DAY OF APRIL, A.D. 2014.

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

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AUTHENTICAL 1320E/S

DATE: 04-25-14