Division of Corporations Electronic Filing Cover Sheet

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(((H14000109123 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for Puture annual report mailings. Enter only one email address please. **

| Email | Address: | | | | |
|-------|----------|--|--|--|--|
| | | | | | |

Foreign Limited Liability Company Thor ASB 75 NE 39th LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

5/7/2014

COVER LETTER

| TO: | Registration Section of Corporation | | | | |
|-----------------------|---|---|------------------------------|---|---|
| SUBJE | CT: THOR A | ASB 75 NE 39TH LLC | | | |
| | - | Nam | e of Limited | Liability Company | |
| The enci Existence | losed "Application o, and check are so | by Foreign Limited Llab bmitted to register the ab | llity Compa 100ve referen | ny for Authorization to ced foreign limited liab | Transact Business in Florida," Certificate ility company to transact business in Flori |
| Please re | etum all correspond | dence concerning this ma | tler to the fi | illowing: | |
| | | Briana Kan | | | |
| | | | Nan | e of Person | |
| | | DLA Piper LLP (US |) | | |
| | | | | /Company | |
| | | 33 Arch Street, 26 | th Sloar | | |
| | | J3 MICH 3HEEC, 20 | | Address | |
| | | | | | • |
| | | Boston, Massachu | | | |
| | | | City/Stat | s and Zip Code | |
| | | briana,kan@diap | iper.com | | |
| | | E-mail address: | (to be used f | or future aunual report not | ification) |
| For furth | ner information con | ecoming this matter, pleas | se call: | | |
| | Britana | V | | | |
| | Briana | Name of Contact Person | | Area Code | 406-5907 Daytime Telephone Number |
| | | | | 7400 0000 | Dayana respirate rations |
| | MAILING ADDI | RESS: | | ADDRESS: | |
| | Registration Section | | | of Corporations on Section | |
| | P.O. Box 6327 | | Clifton B | uilding | |
| | Tallahassee, FL 32 | 2314 | | cutive Center Circle ec, FL 32301 | |
| Enclose | ed is a check for | the following amou | nt: | | |
| | ⊠ \$125.00 Filing | | z Fee & | ☐ \$155.00 Filing Fee & Certified Copy | \$160.00 Filing Fee, Certificate 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:

| 1 | THOR ASB 75 NE 39TH LLC | |
|------------------------|---|---|
| | (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." | or "LLC.") |
| (If nam Liabiti | ne unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate ty Company," "L.L.C," or "LLC.") | name must include "Limited |
| 2. | Delaware 3. | |
| roz | isdiction under the law of which foreign limited liability (FEI number, if applingeny is organized) | icable) |
| 4. | | |
| | (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 603.0905, F.S. to determine penalty liability) | Z. T |
| 5. | 7501 Wisconsin Avenue, Suite 1300W Bethesda, MD 20814 | 54 E 71 |
| | | |
| | (Sireet Address of Principal Office) | GA-C IT |
| 6 | 7501 Wisconsin Avenue, Suite 1300W Bethesda, MD 20814 | mg I |
| | | |
| | (Mailing Address) | |
| 7. T | the name, title or capacity and address of the person(s) who has/have authority to ASB 75 NE 39TH HOLDINGS, LLC - Member Manager | manage is/are: |
| | c/o ASB Capital Management L.P., 7501 Wisconsin Avenue, Suite 1300W Bethesda, | , MD 20814 |
| | | |
| havin accep must | tached is an original certificate of existence, no more than 90 days old, duly authorized custody of records in the jurisdiction under the law of which it is organized. (A stable. If the certificate is in a foreign language, a translation of the certificate und be submitted) Signature of an authorized person ordance with section 605.0203, F.S., the execution of this document constitues an affirmation under the penalties of perjection. | photocopy is not er oath of the translator |
| | re that any false information submitted in a document to the Department of State constitutes a third degree felony as prov Christopher W. Price | |
| | Typed or printed name of signee | |
| | Abea or briting units of silens | |

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.

| Thor ASB 75 N | H 39th LLC | | |
|----------------|--|---|--------------|
| If unavailable | , the alternate to be use | ed in the state of Florida is: | |
| 2. The name | and the Florida street a | address of the registered agent and office are: | |
| | | | |
| | C T Corporation System | n | |
| | C T Corporation System | n (Name) | _ |
| | C T Corporation System 1200 South Pine Island | (Name) | - |
| | 1200 South Pine Island | (Name) | - |
| | 1200 South Pine Island | (Name) | - |

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.

Tammy Tofteroo

By:

(Signature)

Vice President

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

Delaware

DIGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THOR ASB 75 NE 39TH 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 SIXTH DAY OF MAY, A.D. 2014.

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

5528520 8300

140569872

You may verify this cortificate onlin at corb.dolaware.gov/authvor.shtml Jeffrey W. Bullock, Secretary of State

UTHENTICATION: 1348791

DATE: 05-06-14