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Division of Corporations

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: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCAC00000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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#### Foreign Limited Liability Company SUSO 3 Brandon GP LLC

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

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MAY 27 2014

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5/23/2014

#### COVER LETTER

| BJECT:                  | SUSO 3 Brandon G                            |   |                          |   |                         |  |                      |
|-------------------------|---|---|--------------------------|---|-------------------------|--|----------------------|
| •                       | _   | Non                                     | e of Limite              | d Liebility Company                               |                         |  |                      |
| enclosed<br>stance, and | "Application by Pore<br>check are submitted | ign Limited Lial<br>I to register the a | ollity Com<br>bove refer | pany for Authorization<br>enced foreign limited i | to Trans<br>liability o | act Business in Florida," (<br>empany to transact busine | Certific<br>ss in Fl |
| 156 return (            | ili correspondence co                       | oncerning this m                        | stier to the             | following:  | •                       |  |                      |
|                         |   | •                                       |                          |   |                         |  |                      |
|                         |   |   | N                        | ama of Person                                     |                         |  |                      |
|                         |   | •                                       |                          | •   |                         |  |                      |
|                         | ·   | <del></del>                             | F                        | Irm/Company                                       |                         |  |                      |
|                         | •   |   |                          |   |                         |  |                      |
|                         |   |   |                          | Address   |                         | <del></del>  | •                    |
|                         |   | •                                       |                          |   |                         |  |                      |
|                         | · · · · · · · · · · · · · · · · · · ·       |   | Chuks                    | tate and Zip Code                                 |                         |  |                      |
| •                       | •   | •                                       |                          | and and any coop                                  |                         |  |                      |
|                         | adam@slateprope                             |   | 72 ha                    | d for fature namual report                        |                         |  |                      |
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| further inf             | gnimeson concerning                         | this matter, plos                       | se cali;                 |   |                         |  |                      |
|                         |   |   |                          | ( )   |                         |  |                      |
| ·                       | Name of                                     | Contact Person                          |                          | Area Code   | Daytir                  | na Telaphone Number                                      |                      |
| MAI                     | LING ADDRESS:                               |   |                          | RT ADDRESS:                                       |                         |  |                      |
|                         | on of Corporations                          |   |                          | n of Corporations                                 |                         |  |                      |
|                         | tration Section<br>Box 6327                 |   |                          | ation Section<br>Building                         |                         |  |                      |
|                         | hassee, FL 32314                            |   | 2661 B                   | xecutive Center Circle                            |                         |  |                      |
| <b>V</b>                |   | •                                       |                          | sace, FL 32301                                    |                         |  |                      |
|                         |   |   |                          |   |                         |  |                      |
| losed is                | a check for the fo                          | ollowine amou                           | mt:                      |   |                         |  |                      |

## 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.

| FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORE   | IDA:                       |
|--|----------------------------|
| 1. SUSO 3 Brandon GP LLC   |                            |
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," of   | or "LLC.")                 |
|  |                            |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate n<br>Liability Company," "LL.C," or "LLC.")   | arne must include "Limited |
| 2 Dolaware 3   | ·                          |
| (Jurisdiction under the law of which foreign limited liability (Fill number, if applic company is organized)   | rable)                     |
| 4. N/A   | 40 E                       |
| (Dain first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)   | 三 三                        |
| 5, 200 Front Street West, Suite 2400   | 新型 N                       |
| Toronto, Ontario M5V 3K2 CANADA  | SSE S                      |
| (Street Address of Principal Office)   |                            |
| 6. 200 Front Street West, Suite 2400   |                            |
| •  |                            |
| Toronto, Ontario MSV 3K2 CANADA  | <u> </u>                   |
| (Malling Address)  |                            |
| 7. The name, title or capacity and address of the person(s) who has/have authority to m  | ianage is/are:             |
|  | •                          |
| State U.S. Opportunity (No. 3) Holding L.P., 200 Front Street West, Suite 2400, Toronto, Ontario MSV   | 3K2 CANADA - MRG           |
|  |                            |
|  |                            |
|  |                            |
|  |                            |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authen   | ticated by the official    |
| having custody of records in the jurisdiction under the law of which it is organized. (A p   |                            |
| acceptable. If the certificate is in a foreign language, a translation of the certificate unde   | r oath of the translator   |
| must be submitted)   |                            |
|  |                            |
|  | _                          |
| . Signature of an authorized person  |                            |
| (in accordance with section 605,0103, P.S., the execution of this document constitutes an affirmation under the peneities of perjury<br>are aware that any false information submitted in a document to the Department of State constitutes a third degree falony as provide |                            |
| Book P. Walls, Austra St. 19   |                            |
| Paul F. Wells, Authorized Person   | _                          |

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

| PURSUANT   | TO THE PROVE   | Sions of Si   | CTION 605.0113 or 605.0   | 902 (1)(d), FLOR  | EDA.                               |
|--|--|---|---|---|------------------------------------|
| FOLLOWING  | STATEMENT  | MED LIMIT<br>TO DESIGNA   | ED LIABILITY COMPAN<br>ATE A REGISTERED OF  | IY SUBMITS TH   | e<br>E                             |
| AGENT IN T   | he state of f  | LORIDA.   |   | TODAMO REGI   | , ,                                |
| •  |  |   | •   | •   | - P. 45                            |
| 1. The name  | of the Limited Li  | ability Comp  | anv is:   |   | ( ) ( ) ( ) ( ) ( )                |
| SUSO 3 Brando  |  |   |   |   | £.                                 |
| SUSCI S BIRROR   | NOP LLC  |   | · · · · · · · · · · · · · · · · · · ·   |   |                                    |
| If unavailable,  | , the alternate to l   | be used in the  | state of Florida is:  |   |                                    |
|  |  |   | ,   |   | •                                  |
| 2 The seed   | and the Disside at   |   | . Cal   |   |                                    |
| 2. The name (  | min ma tionna si   | reet naoress (  | of the registered-agent and   | office are;   |                                    |
| •  | C T Corporation  | Suntam  | •   |   |                                    |
|  | C / Corporation  |   | (Name)  | <del></del>   |                                    |
| •  |  |   | <b>(</b> )  |   |                                    |
|  | 1200 South Pine  | Island Road   |   |   |                                    |
| •  | Flo  | orida Street Add  | reas (P.O. Box NOT ACCEPTAG   | 1.8)  |                                    |
| •  |  | ,   |   |   |                                    |
|  | Plantation   |   | FL 33324<br>City/State/Zip  |   |                                    |
|  |  |   | Cityistateszip  |   |                                    |
| liability compa<br>registered agei<br>statutes relatin | my at the place di<br>nt and agree to ac<br>ig to the proper a | esignated in the<br>ct in this capa<br>nd complete p<br>litton as regis | o accept service of process is certificate, I hereby accepts. I further agree to conversormance of my duties, a tered agent as provided for | ept the appointme<br>uply with the provi<br>and I am familiar v | nt as<br>isions of all<br>vith and |
|  |  | (Signa  | turo)   | ADET & second   | _                                  |
|  |  |   | 30  | IARET E. AGU!<br>ecial Assistant Secre                          | TEAHN<br>lary                      |
| •  | •  | \$ 100.00   | Filing Fee for Applicati  |   |                                    |
|  | •  | \$ 25.00<br>\$ 30.00  | Designation of Register<br>Certified Copy (options  |   |                                    |
| -  |  | \$ 5.00   | Certificate of Status (or   |   |                                    |
|  |  |   | ``  | •   |                                    |
|  |  |   |   |   |                                    |

# Delaware

PAGE '

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SUSO 3 BRANDON GP 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-SECOND DAY OF MAY, A.D. 2014.

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

5597769 8300

140693529

You may verify this cortificate online at corp.delaware.cor/suthyor.shtml

Jeffrey W. Bullock, Secretary of State

UTHENTXCATION: 1394551

DATE: 05-22-14