Florida Department of State

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SECRETARY OF STATE

Foreign Limited Liability Company 657 Island, LLC

Certificate of Status	0
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5/29/2014

COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: 657 Island, LLC	
	nited Liability Company
The enclosed "Application by Foreign Limited Liability Conference, and check are submitted to register the above re	ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited (lability company to transact business in Florida
Please return all correspondence concerning this matter to	the following:
Barry Swirsky	
•	Name of Person
Wind River Holdings, LF	
•	Flrm/Company
535 Croton Rd., Suite 200	
	Authress
King of Prussia, PA 19406	
	y/State and Zip Code
bswirsky@windriverholdings.com	
E-mail address: (to be t	sed for future annual report notification)
For further information concerning this matter, please call:	
Barry Swirsky	pl (610) 962-3791
Name of Contact Person	Area Code Daytime Telephone Number
Division of Corporations Registration Section P.O. Box 6327 Cliffe Tallahassee, FL 32314 2661	RET ADDRESS: station Section on Bullding Executive Center Circle uhassee, FL 32301
Enclosed is a check for the following amount: 5125.00 Filing Fee E \$130.00 Filing Fee & 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 POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must inc	nude "Limited Liebniny Company," " Lillin," o	"ILLA")	
f name unavaliable, enter alternate name adopted for the purpose of inhility Company," "L.L.C," or "LLC.")	transpoting business in Florida. The atternate na	ıma must İnclude "l	imited
Delaware	3_ applied for		
(Jurisdiction under the law of which foreign limited liability company is organized)	(PEI number, if applica	ible)	
anapany is organizady	•	≱ @	7
(Date first transacted business i (See sections 605.0904 & 605.090	n Florida, if prior to registration.) 5, F.S. to determine penalty (inhility)		ZAY
555 Croton Rd., Suite 200, King of Prussia, PA 19406	·	<u> </u>	29
		171	
	ss of Principa) Office)	1 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
•=	22 Or Litterbit Ottice)	STAI	
555 Croton Rd., Suite 200, King of Prussia, PA 19406		<u> </u>	<u> </u>
7. The name, title or capacity and address of the per		•	
7. The name, title or capacity and address of the per	rson(s) who has/have authority to ma	ise, Barry Swirsk	
7. The name, title or capacity and address of the per-	rson(s) who has/have authority to ma	ise, Barry Swirsk	
7. The name, title or capacity and address of the per- Managers: Paul Brennan, Timothy J. Dwyer, Brian Friedman. The address of each of the above managers in the address of each	Andrew Janes, Paul Peterson, Robert Strot Mind River Holdings, 555 Croton King of Prussia, PA 19406 More than 90 days old, duly authent the law of which it is organized. (A pi a translation of the certificate under	Rd., Suite 200, icated by the o hotocopy is no oath of the tra	y official t trustate
7. The name, title or capacity and address of the per- Managers: Paul Brennan, Timothy J. Dwyer, Brian Friedman. The address of each of the above managers in Attached is an original certificate of existence, no aving custody of records in the jurisdiction under the compable. If the certificate is in a foreign language, nust be submitted)	Andrew Janes, Paul Peterson, Robert Strot Mind River Holdings, 555 Croton King of Prussia, PA 19406 More than 90 days old, duly authent the law of which it is organized. (A pi a translation of the certificate under	Rd., Suite 200, icated by the o hotocopy is no oath of the tra	y official t trustate

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	of the Limited Liability Cor	npany is:			
lf unavailable,	the alternate to be used in	the state of Florida is:			
2. The name a	nd the Florida street addres	es of the registered agent and office are:	· Z K	- 14	
	C T Corporation System		· [A]	MAY	i i
		(Name)	ASS:	/ 29	garanta.
	1200 South Pine Island Road	•	記しませ	⊒£ 	
	Florida Street /	Address (P.O. Box NOT ACCEPTABLE)	- 1.01 1.01 1.01	·i <u>:</u>	Email 1
	Plantation	FL 33324	24	ক্র	Secret.
		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.

Ву:	C T Corporation System	July	مكتعلاه	im)
	(Sign	nature)	ANN.	J. WILLIAMS
	•		Assistan	t Vice President

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (uptional)
\$ 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 "657 ISLAND, 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-EIGHTH DAY OF MAY, A.D. 2014.

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

SECNETARY OF STATE

5540647 8300

140735919

You may verify this certificate online at corp, delawere.gov/authvor.shtml

Jeffrey W. Bullock, Secretary of State

DATE: 05-28-14