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| Certified Copies | _ Certificates o | of Status | | | |
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| ION SERVICE COMPANY. | | | , | | |
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| ACCOUNT NO. | : | 120000000 | 195 | | |
| REFERENCE | : | 182606 | 5011226 | | |
| AUTHORIZATION | : | VX. | | , | |
| COST LIMIT | : | \$ 125.00 | Klman | | |
| ORDER DATE : June 18, 2014 | | | | | |
| ORDER TIME : 4:31 PM | | | | | |
| ORDER NO. : 182606-005 | | | | | |
| CUSTOMER NO: 5011226 | | | | | |
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| FOREIGN F | ILI | NGS | | | |
| NAMÉ: ORLANDO STARFI | LYE: | R, LLC | | | |
| XXXX QUALIFICATION (TYPE: L1 | ក្) | | | E | grammer of the second s |
| PLEASE RETURN THE FOLLOWING AS | PR | OOF OF FILE | ING: | $\frac{1}{2}$ | ;- +* u !: 4 |
| CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STA | AND: | ING | | 7 0 3 3 | 1 |

EXAMINER:

CONTACT PERSON: Emily Gray -- EXT# 62925

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: Orlando Starflyer, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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 "LLC.") applied for Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) upon qualification (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 6130 Edgewater Drive, Suite A Orlando, FL 32810 (Street Address of Principal Office) _{6.} 6130 Edgewater Drive, Suite A Orlando, FL 32810 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are Ritchie Armstrong - Manager 6130 Edgewater Drive, Suite A Orlando, FL 32810 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

Signature of an authorized person

Signature of an authorized person

acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator

must be submitted)

(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.)

Ritchie Armstrong

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.

| | of the Limited Liability Constantly Starflyer, LLC | - • | | | ··· |
|--|--|----------------------------|---------------------|--|------|
| If unavailable | , the alternate to be used i | n the state of Florida is: | | | |
| 2. The name | and the Florida street add | ress of the registered ag | ent and office are: | # 477 to 2 to 10 t | F 19 |
| | Thomas R. S | <u> </u> | | | 5 |
| 301 E. Pine Street, Suite 1400 | | | : | 10 1,9 — | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | | | | | ل |
| | Orlando | FL | 32801 | <u>.</u> | |
| | | 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.

(Signature)

\$ 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 "ORLANDO STARFLYER, 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 EIGHTEENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORLANDO STARFLYER, LLC" WAS FORMED ON THE ELEVENTH DAY OF JUNE, A.D. 2014.

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

5549818 8300

AUTHENTY CATION: 1465263

DATE: 06-18-14

140855037
You may verify this certificate online at corp.delaware.gov/authver.shtml