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ACCOUNT NO. : I2000000195

REFERENCE : 202656 4331939

AUTHORIZATION :

COST LIMIT

ORDER DATE : July 2, 2014

ORDER TIME : 1:20 PM

ORDER NO. : 202656-005

CUSTOMER NO: 4331939

FOREIGN FILINGS

NAME: NAPLES NORTH, LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER:

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:

Naples North, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") finame unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limitability Company," "L.L.C," or "LLC.") Delaware [Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)	
f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limi lability Company," "L.L.C," or "LLC.") Delaware [Jurisdiction under the law of which foreign limited liability (FBI number, if applicable)	
Delaware [Jurisdiction under the law of which foreign limited liability] [Jurisdiction under the law of which foreign limited liability] [Jurisdiction under the law of which foreign limited liability] [Fill number, if applicable]	
Delaware [Jurisdiction under the law of which foreign limited liability (FBI number, if applicable)	ited
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
company is organized) (FBI number, if applicable)	
(Date first transacted business in Florida, if prior to registration.)	
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
505 S. Flagler Drive, Suite 700	
West Palm Beach, FL 33401	
(Street Address of Principal Office)	
505 S. Flagler Drive, Suite 700	
West Palm Beach, FL 33401	
(Mailing Address)	
The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Ferry Taylor, Manager	
505 S. Flagler Drive, Suite 700	
Vest Palm Beach, FL 33401	
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the office aving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not exceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translation be submitted)	
Signature of an authorized person 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 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.)	arc tni
Terry Taylor, Manager	201
Typed or printed name of signee	=
	=
<u>ان کی کی ر</u>	7

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 Limited Liability Company is: Naples North, LLC		
If unavailable, the alternate	o be used in the state of Florida is:	
2. The name and the Flori	street address of the registered agent and office are:	
Corpo	ation Service Company	
1201	(Name) lays Street	
Tallaḥas	Florida Street Address (P.O. Bóx NOT ACCEPTABLE) e 32301	
	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.

Emily Signature) Asst VF

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

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NAPLES NORTH, 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 SECOND DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NAPLES NORTH, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF APRIL, A.D. 2014.

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

5519188 8300

140913511

AUTHENTICATION: 1505725

DATE: 07-02-14

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