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TAJULIO PHILLS

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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: SOCH Paranes LLC Name of Limited Liability Company |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. |
| Please return all correspondence concerning this matter to the following: |
| Cienge abbondante |
| Firm/Company |
| 18320 NE 8±6 Ave |
| North Mary F1 33179 City/State and Zip Code |
| Content & and com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Chevral Abbondante at (201) 321-161659 Name of Contact Person Area Code Daytime Telephone Number |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: \$\Begin{array}{c} \pm\$ \text{\$125.00 Filing Fee} & \Begin{array}{c} \pm\$ \text{\$130.00 Filing Fee} & \Begin{array}{c} \Beta\$ \text{\$155.00 Filing Fee} & \Begin{array}{c} \Pm\$ \text{\$\$160.00 Filing Fee}, Certificate \\ |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF F | |
|---|--|
| 1. She H Partners LLC (Name of Foreign Limited Liability Company, ""L.L. | .C," or "LLC.") |
| | |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida. The alter Liability Company," "L.L.C." or "LLC.") | mate name must include "Limited |
| 2. Unfisition under the law of which foreign limited liability (FEI number, if company is organized) | applicable) |
| 4. N/A | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) | 7 |
| 5. 4730 S. Fort apache Rd, Ste 300 | |
| Las Vegas, NIV 89147 | |
| (Street Address of Principal Office) | |
| 6 | |
| | |
| (Mailing Address) | <u> </u> |
| 7. The name, title or capacity and address of the person(s) who has/have authority | to manage is/are: |
| Derek Rowley, mas | |
| 4730 S. Fort Marche Rd Ste. 200 | |
| | |
| Las Vegas, NV 89147 | , , , , , , , , , , , , , , , , , , , |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly at having custody of records in the jurisdiction under the law of which it is organized acceptable. If the certificate is in a foreign language, a translation of the certificate must be submitted) | (A photocopy is not |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly at having custody of records in the jurisdiction under the law of which it is organized. acceptable. If the certificate is in a foreign language, a translation of the certificate | (A photocopy is not |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly at having custody of records in the jurisdiction under the law of which it is organized. acceptable. If the certificate is in a foreign language, a translation of the certificate | (A photocopy is not under oath of the translator |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly at having custody of records in the jurisdiction under the law of which it is organized acceptable. If the certificate is in a foreign language, a translation of the certificate must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of his document constitutes an affirmation under the penalties of | (A photocopy is not under oath of the translator |

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.

| I. The name of | of the Limited Liability Cor | mpany is: | | | |
|-----------------|------------------------------|--|------------------------------|---------------------------------------|------|
| SDC | H Partners, 1 | LC | | | |
| If unavailable, | the alternate to be used in | the state of Florida is: | | | |
| | | - | | _ | |
| 2. The name a | nd the Florida street addre | ss of the registered agent and office are: | | 14 | |
| | Business Filing | gs Incorporated | | رــــــــــــــــــــــــــــــــــــ | a |
| | | (Name) | * (1.17) (2.17) (3.17) | 0 | |
| | 515 E. Park A | venue | 177 - 77 13 | E P | 1 mg |
| | Florida Street A | Address (P.O. Box NOT ACCEPTABLE) | SE | 5 5 | 1, |
| | Tallahassee | FL 32301 | ₹ S | ៊ែរា | |
| | | City/State/Zip | - | | |

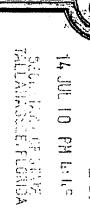
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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)

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, SDCH PARTNERS, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 30, 2008, and is in good standing in this state.

THE OF

Electronic Certificate
Certificate Number: C20140703-0589
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 3, 2014.

ROSS MILLER Secretary of State