Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850)222-1092

Fax Number : (850)878-5368

Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please.

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Foreign Limited Liability Company 341 HIBISCUS AVENUE, LLC

| Certificate of Status | 1 |
|-----------------------|----------|
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Corporate Filing Menu

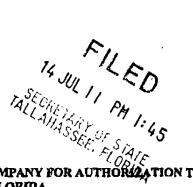
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Frank Stranger

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | |
|--|---|---|--|--|--|
| SUBJI | ECT: 341 HIBISCUS AVENU | a, LLC | | | |
| | | Name of Limited Liability Company | | | |
| | | Limited Liability Company for Authorization to Transact Business in Florida," Certificate of egister the above referenced foreign limited liability company to transact business in Florid | | | |
| Please | return all correspondence conce | ming this matter to the following: | | | |
| | MAURA A. ZISKA | | | | |
| Name of Person | | | | | |
| | KOCHMAN & ZISKA PLC | | | | |
| | Pirm/Company | | | | |
| | 222 LAKEVIEW AV | 222 LAKEVIEW AVENUE, SUITE 1500 | | | |
| | Address | | | | |
| | WEST PALM BEAC | WEST PALM BEACH, PL 33401 | | | |
| City/State and Zip Code | | | | | |
| | MZISKA@FLORIDAWILLS.COM | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| For fur | ther information concerning this | maner, please call: | | | |
| | MAURA A. ZISKA | at (561 802-8960 | | | |
| | Name of Pe | rson Area Code Daytime Telephone Number | | | |
| MAILING ADDRESS: Division of Corporations Registration Section | | STREET ADDRESS: Division of Corporations Registration Section | | | |
| P.O. Box 6327 Tallahassee, PL 32314 | | Clifton Building 2661 Executive Center Circle Tallahassre, FL 32301 | | | |
| Enclo | sed is a check for the follo | wing amount: | | | |
| | □ \$125.00 Piling Pee 图 : | 130,00 Filing Fee & \$\Bigcup \$155.00 Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate Certificate of Status & Certified Copy of Status & Certified Copy | | | |

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| 7/64/5 |
|---|
| APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA |
| IN COMPLIANCE WITH SECTION 601.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: |
| 1. 341 HIBISCUS AVENUE, 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 and attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") |
| 2. DELÄWARE 3 |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) |
| 4. N/A |
| (Date that transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) |
| 5. 6/6 KOCHMAN & ZISKA PLC, 222 LAKEVIEW AVENUE, SUITE 1500 |
| WEST PALM BEACH, FL 33401 |
| (Street Address of Principal Office) |
| 6. CO KOCHMAN & ZISKA PLC, 222 LAKEVIEW AVENUE, SUITE 1500 |
| WEST PALM BEACH, FL 13401 |
| (Mailing Address) |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: |
| MAURA A. ZISKA, MANAGER |
| 222 LAKEVIEW AVENUE, SUITE 1500 |
| WEST PALM BEACH, FL 33401 |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record in the jurisdiction under the law of which it is organized. (A photocopy is not ecceptable. If the certificate is in a foreign language, a translation of the certificate under cath of the translator must be submitted.) |
| Signature of an authorized person |
| |
| (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the panelties 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 follows as provided for in s.\$17,155, P.S.) |
| MAURA A. ZISKA |
| Typed or printed name of signee |

FL897 - 13/91/2013 Walters Kitzens Online

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 at 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 | f the Limited Liability Compa | my is: | | |
|--|---|---|--|--|
| 341 HIBISCUS AVENUE, LLC If unavailable, the alternate to be used in the state of Florida is: | | | | |
| | | | | |
| | C T Corporation System | | | |
| | (Name) | | | |
| | 1200 South Pine Island Road | | | |
| | Plorida Strest Address (P.O. Box NOT ACCEPTABLE) | | | |
| | Plentation | FL 33324 City/State/Zip | | |
| liability compa registered agen statutes relatin | ny at the place designated in the at and agree to act in this capa g to the proper and complete p | to accept service of process for the above stated limited his certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all verformance of my duties, and I am familiar with and lered agent as provided for in Chapter 605, Florida | | |
| | By: C.T. Corporation System By: USK | JoAn Tolosa Assistant Secretary | | |
| (Signature) | | | | |
| | \$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00 | Filing Fee for Application Designation of Registered Agent Certified Copy (optional) 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 "341 HIBISCUS AVENUE, 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 ELEVENTH DAY OF JULY, A.D. 2014.

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

5544675 8300

140944052

You may verify this curtificate online at corp.delaware.gov/authver.ahtml Jeffrey W. Bullock, Secretary of St

DATE: 07-11-14