Division of Corporations Page 1 of 1

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From:

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Account Number : FCA000000023

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Fax Number

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Foreign Limited Liability Company TAH Florida LLC

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COVER LETTER

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	ration Section on of Corporations						
T	AH PLORIDA LLC						
SUBJECT: 1		me of Limit	ed Liability Company		···		
(Phononical Hall							
Existence, and	Application by Foreign Limited Listheck are submitted to register the	above refer	pany for Authorization reneed foreign limited li	to Transact Business iability company to tr	in Florida," Cer ansact business	nificate d in Plorid	of la
Please return all	correspondence concerning this n	natter to the	following:				
	Emily Moniz	•					
		N	lama of Porson				
	CT Corporation	on Sys	tem			2014	eranila.
		P	imn/Company			ي	490470
	155 Federal S	St. Su	ite 700			သ	2 .
			Address			T=	
	Boston MA 021	10				AH 9:	***
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	E-mail addres:	s: (to be use	d for futuro annual report :	notification)			
For further infor	mation concerning this matter, ple	nse call:					
TERE!	SA FOLEY		ai (617)_57	74-4013			
	Name of Contact Person	4	Area Code	Daytime Telephone	Number		
MAIL	NG ADDRESS:		ET ADDRESS:				
	n of Corporations ation Section		n of Corporations atlon Section				
	ox 6327		Building				
Tallaha	ssee, FL 32314	2661 B	xecutive Center Circle ssee, PL 32301				
Enclosed is a	check for the following amor	unt:		•			
	i.00 Filing Fee S130.00 Filing Certificate o	ng Fee &	☐ \$155.00 Filing Per Certified Copy		ling Feo, Certifi & Certified Capy		

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:

name unavailable, enter alternate name adopted for the purpos ability Company," "L.L.C," or "LL.C.")	te of transacting business in Florid	a. The alternate :	nama musi inci	ude '¶.imí!		
DELAWARE	DELAWARE 3 APPLICATION PENDING					
(Jurisdiction under the law of which foreign limited liability company is organized)	y (PBI number, if applicable)					
NOT APPLICABLE (Date first transacted business)	ess in Plorida, If prior to registrati	on.)	 .			
(See sections 605.0904 & 605	.0903, P.S. to defermine penalty i	iability)				
2365 IRON POINT ROAD, SUITE 102	FOLSOM	CA	95630			
(Street A	ddress of Principa) Office)		· · · ·	1		
2365 IRON POINT ROAD, SUITE 102	FOLSOM	CA	95630 ¹	က် များ		
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	(Malling Address)		· · ·			
. The name, title or capacity and address of the	person(s) who has/have a	uthority to n		-		
AH OPERATIONS LLC, MGR C/O TRICON CAPITA	AL, 1067 YONGE ST., TORO	NTO ONTARI	nanage is/as			
The name, title or capacity and address of the AH OPERATIONS LLC, MGR C/O TRICON CAPITAL DAM LEVINSON, MNGR 5300 NW 12TH AVENUE. Attached is an original certificate of existence, aving custody of records in the jurisdiction undeceptable. If the certificate is in a foreign langua	AL, 1067 YONGE ST., TORO E, FT. LAUDERDALE, FL 33 no more than 90 days old or the law of which it is or	onto ontari 309 I, duly auther ganized. (A	nanage is/as O CAN M4V oticated by ophotocopy	v 2L2		
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AH OPERATIONS LLC, MGR C/O TRICON CAPITAL DAM LEVINSON, MNGR 5300 NW 12TH AVENUE Attached is an original certificate of existence, aving custody of records in the jurisdiction under ceptable. If the certificate is in a foreign languary that be submitted) Signature Signature with section 605.0203, F.S., the execution of this document is average that any false information submitted is a document to the Department of the D	AL, 1067 YONGE ST., TORO E, FT. LAUDERDALE, FL 33 no more than 90 days older the law of which it is orage, a translation of the ce of an authorized person in constitutes an affirmation under the unment of state constitutes a third deg	duly author ganized. (A rtificate unde	nanage is/as OCAN M4V nticated by (photocopy is or oath of the	the officis not		

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.

If unavailab	le, the alternate to be used in th	e state of Flori	da is:		-
2. The name	e and the Plorida street address	of the register	ed agent and office are	»:	-
	C T Comoration System				
		(Namo)			
	1200 South Pine Island Road			The state of the s	201
	Plorida Street Ad	idress (P.O. Box	NOT ACCEPTABLE)		∓ ⊱
	Plantation	FL.3	3324		2014 JUL 3 I
		City/State/2			
liability com registered as statutes relat	named as registered agent and pany at the place designated in gent and agree to act in this cap ling to the proper and complete bligations of my position as regi	this certificate acity. I further performance o	I hereby accept the ap agree to comply with fmy duties, and I am fo	pointment as 5 = 1 the provisions of all amiliar with and	9.0
	C T Corporation System Co	mie Buy	Consider	PANT.	
	(Slgr	inture) ((Starter)		
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation Certified C	for Application n of Registered Agent opy (optional) 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 "TAH FLORIDA 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 JULY, A.D. 2014.

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

2014 JUL 31 AM 9: 09

5571428 8300

141005325

You may verify this cortificate online

Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 1572852

DATE: 07-28-14