Division of Corpurations

Page 1 of 1

Florida Department of State

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Division of Corporations

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Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

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Foreign	Limited	Liability	Company
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COVER LETTER

SUBJECT:	ROC II FL Auvers V	llage, LLC			
			ed Liability Company		
				to Transact Business in Florida," iability company to transact busin	
Please return	all correspondence co	ncerning this matter to the	: fallowing:		
	Brandy Withams				
		N	ame of Person		
	Bridge Investmen	Group Partners			
		F	irm/Company		
	5295 So. Comme	ce Drive, Suite 100			
			Address		
	Murray, Utah 84				
		City/S	itate and Zip Code		
	b.williams@bridge	-igp.com E-mail address: (to be use	d for future control control	positicialon)	
For fu n her in	nformation concerning	this matter, please call:	a to tome mater (abov)	nonnesion,	
Bra	andy Williams		at (801) 7	16-5427 Dayrime Tolophono Number	
	Name of	Contact Person	Area Code	Dayrime Telephone Number	
Div Reg	ALING ADDRESS: islon of Corporations distration Section Box 6327	Divisio Registr	ET ADDRESS: on of Corporations ation Section Building		
	aliassec, FL 32314	2661 E	xecutive Center Circle assee, FL 32301		
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23 3	125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fo	ce & D \$160.00 Filing Fee, Co	

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:

Delaware Jurisdiction under the low of which foreign limited liability (FEI 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) 5295 So. Commerce Drive, Suite 100 Murray, Utah 84107 (Street Address of Principal Office) Same as above (Mailing Address) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Cit Real Estate Holdings, LLC, Sole and Managing Member Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official ving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not reptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator at be submitted) Signature of an authorized person Coordance with section 605 0201, F.S., the execution of this document constitutes as affirmation under the penalties of perjuty that the facts stated borein are to work that any false information submitted in a document to the Department of State constitutes a third degree felory as provided for in a \$17.155, F.S.)	ROC II FL Auvers Village, LLC		
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Jonathan P. Slager, Manager			
JORGINAN P. Niager Manager	temples B. Cl Manage		
Typed or printed name of signee	Jonathan P. Slager, Manager Typed or printed name of slanes		

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.

	uvers Village, LLC		· =
If unavailat	ole, the alternate to be used in the	e state of Florida is:	
2. The nam	ne and the Florida street address	of the registered agent and office are:	· · · · · · · · · · · · · · · · · · ·
	C T Corporation System		Eco
		(Name)	
	1200 South Pine Island Road		
	Florida Street Add	iress (P.O. Box NOT ACCEPTABLE)	
	Plantation	FY 33324	***
		City/State/Zip	
			<u></u>
liability con registered a statutes rela	ipany at the place designated in t gent and agree to act in this capa iting to the proper and complete p	to accept service of process for the abovitis certificate, I hereby accept the appoincity. I further agree to comply with the performance of my duties, and I am famistered agent as provided for in Chapter t	intment as provisions of all liar with and
	C T Corporation System	Contract	· ·
	Signe (Signe	sture)	
	\$ 100.00	Filing Fee for Application	
	\$ 25.00 \$ 30.00	Designation of Registered Agent Certified Copy (optional)	
	\$ 5.00	Certificate of Status (optional)	

Delaware

DACE '

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ROC II FL AUVERS VILLAGE, 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 FIRST DAY OF AUGUST, A.D. 2014.

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

6-1 AM 9:02

5578828 8300

141021293

You may verify this certificate only

AUTHENTICATION: 1586720

DATE: 08-01-14