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DEPARTMENT OF STATE

14 AUG -4 PH 1:45
SECRILLARY OF STATE
FALLAHASSEE, FLORIDA

AUG -5 2014

T. BROWN



August 4, 2014

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 9230067 SO

Customer Reference 1: 365962.1 Customer Reference 2: Weg

Dear Department of State, Florida:

Please obtain the following:

LCP Prairie, LLC (DE) Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com

COVER LETTER

TO:	Registration Section Division of Corporation	S				
SIIB IE	CT: LCP Prair	ie, LLC				
SUBJE			ed Liability Company	***		
				ansact Business in Florida," Certificate of y company to transact business in Florida		
Please re	eturn all correspondence co	oncerning this matter to the	following:			
•	Diane S. ¹	Williams, Senio	r Paralegal			
		N	ame of Person			
	DLA Pipe	r LLP (US)				
		F	irm/Company			
6225 Smith Avenue						
			Address			
	Baltimore	, MD 21209				
		City/S	tate and Zip Code			
	dalton@o	n.aibn.com				
		E-mail address: (to be use	d for future annual report notific	ation)		
For furth	er information concerning	this matter, please call:				
	Diane S. Williams		410 580-	4423		
	Name of	Contact Person		ytime Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisio Registr Clifton 2661 E	et ADDRESS: n of Corporations ation Section Building executive Center Circle essee, FL 32301			
	ed is a check for the for \$125.00 Filing Fee	ollowing amount; □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	1 \$160.00 Filing Fee, Certificate of Status & Certified Copy		

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:

1 LCP Prairie, 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. The alternate Liability Company," "L.L.C," or "LLC.")	name must include "Limited
2. Delaware 3. 46-1051871	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if appl	729 7
4	T 8 7
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. One Glen Park Avenue, Suite 101	经 而
Toronto, Ontario, Canada, M6B 4M5	7.53
(Street Address of Principal Office)	22 F
6. One Glen Park Avenue, Suite 101	A
Toronto, Ontario, Canada, M6B 4M5	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to	manage is/are:
Sheldon Salcman, Manager, One Glen Park Avenue, Suite 101, Toronto, Ontario, Ca	anada, M6B 4M5
Zvi Tress, Manager, One Glen Park Avenue, Suite 101, Toronto, Ontario, Canada,	M6B 4M5
8. Attached is an original certificate of existence, no more than 90 days old, duly authe having custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate und must be submitted)	photocopy is not
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjular aware that any false information submitted in a document to the Department of State constitutes a third degree felony as proving the constitutes as third degree felony as proving the constitutes as the cons	iry that the facts stated herein are true. ided for in s.817.155, F.S.)
Sheldon Salcman	
Typed or printed name of signee	

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.

The name of the Limited Liability Company is: LCP Prairie, LLC						
If unavailable	e, the alternate to be used	ed in the state of Florida is:				
2. The name	and the Florida street ad	address of the registered agent and office are:				
	C T Corporation S	System				
·		(Name)				
	1200 South Pine Island Road					
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Plantation	FL 33324				
		City/State/Zip				
liability comp registered ag statutes relati	oany at the place designat ent and agree to act in th ing to the proper and com	ent and to accept service of process for the above stated ated in this certificate, I hereby accept the appointment this capacity. I further agree to comply with the provision mplete performance of my duties, and I am familiar with as registered agent as provided for in Chapter 605, Floor	t as ions of all th and			
	Conin	Connie Bryan				
		(Signature) Assistant Secretary				
	\$ 1	100.00 Filing Fee for Application				
	\$	25.00 Designation of Registered Agent				

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LCP PRAIRIE, 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 BEEN PAID TO DATE.

5217517 8300

141024546

AUTHENTY CATION: 1586669

DATE: 08-01-14

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