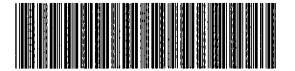
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COVER LETTER

TO: Registration Section **Division of Corporations**

Marin RE, 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:

Eugene F. Pollingue, Jr.

Arnstein & Lehr, LLP

515 North Flagler Drive, Suite 600

West Palm Beach, Florida 33401

City/State and Zip Code

efpollingue@arnstein.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eugene F. Pollingue, Jr.
Name of Contact Person Area Co

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:

\$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$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. Marin RE, 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. Th Liability Company," "L.L.C," or "LLC.")	e alternate name must include "Limited
2. Texas 3. Not Applicable)
	ber, if applicable)
4. Not Applicable	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability	у)
_{5.} 2836 Old Cypress North	
Palm Beach Gardens, Florida 33418	
(Street Address of Principal Office) 6. PO Box 33539	
Palm Beach Gardens, Florida 33420	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have author	ority to manage is/are:
Raymond A. Diaz, President and Manager	
	ng 19 ng
	<u> </u>
8. Attached is an original certificate of existence, no more than 90 days old, dul having custody of records in the jurisdiction under the law of which it is organiacceptable. If the certificate is in a foreign language, a translation of the certific must be submitted)	zed. (A photocopy is not
4-2-2	
Signature of an authorized person In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalt im aware that any false information submitted in a document to the Department of State constitutes a third degree felo	ties of perjury that the facts stated herein are true. ony as provided for in s.817.155, F.S.)
Raymond A. Diaz	

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.

	of the Limited Liability Compa	any is:	
	e, the alternate to be used in the	state of Florida is:	
2. The name	and the Florida street address of	of the registered agent and office are):
	Eugene F. Pollir	ngue, Jr.	
		(Name)	
	515 North Flagle	er Drive, Suite 600	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	West Palm Beach	_{FL} 33401	
		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)

Corporations Section P O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Marin RE, LLC (file number 801909618), a Domestic Limited Liability Company (LLC), was filed in this office on January 06, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 24, 2014.



Phone: (512) 463-5555

Prepared by: Carrie Hinze

NANDITA BERRY

Nandita Berry Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 550462100002