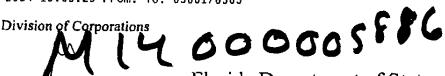
Page 1 of 1



Florida Department of State **Division of Corporations**

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: I. 5400 COLLINS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "(L.C.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liebility Company," "L.L.C," or "LLC.") _{2,}Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (PEI number, il applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to defermine pensity liability) , 917 Tahoe Boulevard, Suite 200 Incline Village, NV 89451 (Street Address of Principal Office) 6. Same as above (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Nathan A. Horvath, Manager, 917 Tahoe Blvd., Ste. 200, Incline Village, NV 89451 Peter M. Castleman, Manager, 917 Tahoe Bivd., Ste. 200, Incline Village, NV 89451 Mark J. Sullivan, Manager, 1700 H Street, NW, Washington, DC 20006 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person

(In accordance with section 605.0203, P.S., the execution of this document contributes an affirmation under the parallels of perjuty that the facts stated herein are true. I am aware that any fishe information submitted in a document to the Department of State constitutes a third degree fallony as provided (he in a 817.135, P.S.) MARK J. SULLTWAN

Typed or printed name of signes

1-3---

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.

1. The name	e of the Limited Liabi	lity Company is:			
5400 Co	llins, LLC				
If unavailabl	ie, the alternate to be	ised in the state of	f Florida is:		
2. The name	e and the Florida stree	t address of the re	egistered agent and office a	re:	
	C T Corporation Sys	tem			
		(Na	me)		
	1200 South Pine Isla	ind Road			\$ ₽U
	Florid	a Street Address (P.C), Box NOT ACCEPTABLE)		G
			****	S.F.	Ci
	Plantation	City	FL 33324 /State/Zip		120
		C		<u></u>	ç
	_				02
Having been	named as registered :	igent and to accep	nt service of process for the ificate, I hereby accept the c	above stated limited :	10
revistered as	pany at the place aesi; eent and agree to act i	inatea in mis certi n this capacity. It	further agree to comply with	h the provisions of all	
statutes relat	ing to the proper and	complete perform	ance of my duties, and I am	familiar with and	
-	oligations of my positi	n as registered as	gent as provided for in Cha	oter 605, Florida	
Statutes.		١.	-A (- A		
	_ C T Corporation	System / / /	XEDIDIL	/	
	Ву:	(Signature)	0-20UV	Kristin Bolder	1
		(a.g.istare)		Assistant Secreta	ary
		\$ 25.00 Desig \$ 30.00 Certi	g Fee for Application mation of Registered Agei fied Copy (optional) ficate of Status (optional)	nt	

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Delaware

DAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "5400 COLLINS, 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 EIGHTEENTH DAY OF AUGUST, A.D. 2014.

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

14 AUG 18 AH B: 02
SECRETARY A SINE
TAN LARASSER FIRRIDA

5575360 8300

141081338

You may verify this certificate enlin at corp.delawers.gov/authver.shtml AUTHENTICATION: 1627611

DATE: 08-18-14