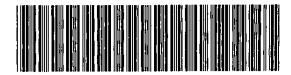
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(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, , ,			
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NCRETARY OF STATE

FILED



ACCOUNT NO. : I2000000195

REFERENCE : 300041

8011783

AUTHORIZATION :

COST LIMIT : \$ 160.00

ORDER DATE: September 17, 2014

ORDER TIME : 9:29 AM

ORDER NO. : 300041-005

CUSTOMER NO: 8011783

#### FOREIGN FILINGS

NAME: CARMENDY SQUARE PROPERTIES,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

\_\_\_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

	legistration Section Hvision of Corporations			
SUBJECT	. Carmedy Square Prope	rties, LLC		
SUBJECT		f Limited Liability Company	· · · · · · · · · · · · · · · · · · ·	
	ed "Application by Foreign Limited Liability and check are submitted to register the above			
Please retu	arn all correspondence concerning this matte	r to the following:	•	
	Jim A Hearn			
		Name of Person		
Apexone Investment Partners				
Firm/Company				
2603 Augusta Dr. Suite#400				
		Address		
	Houston, TX 770	)57	,	
		City/State and Zip Code		
	jhearn@apexone	•		
	E-mail address: (to	be used for future annual report notification)		
For further	information concerning this matter, please of			
J	lim Hearn	at (713 ) 231-14  Area Code Daytime Te	20	
	Name of Contact Person	Area Code Daytime Te	lephone Number	
Di Re P.	ivision of Corporations Egistration Section O. Box 6327 Illahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 1661 Executive Center Circle Fallahassee, FL 32301		
	is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee Certificate of Sta	ee & 🔲 \$155.00 Filing Fee & 🔳 \$16	50.00 Filing Fee, Certificate 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 FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Carmendy Square Properties, 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 name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) (Street Address of Principal Office) (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Jim A. Hearn, Manager Houston 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

Signature of an authorized person
(In accordance with section 605,0203, F.S., the exception of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a occurrent to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jim A. Hearn

must be submitted)

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.

	ne of the Limited Liability Company is:	
<u></u>	ele, the alternate to be used in the state of Florida is:	
2. The name	e and the Florida street address of the registered agent and office are:	2014 SEP SECULIT FALLARIA
	Corporation Service Company (Name)	17 ASSEE
	1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	AN 8: 20 PSTATE FRORDA
	Tallahassee FL 32301 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.

Corporation Service Company By:	Robert O'Byrne Vice President
(8)griature)	

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CARMENDY SQUARE PROPERTIES, 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 SEVENTEENTH DAY OF SEPTEMBER, A.D.

2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CARMENDY SQUARE PROPERTIES, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2014.

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

5595430 8300

141187181

AUTHENTICATION: 1703630

DATE: 09-17-14

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