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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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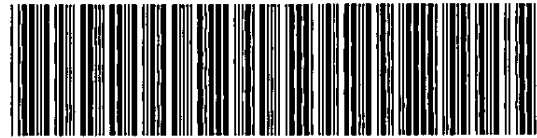
(Business Entity Name)

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DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

SEP 30 2014

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CT Corporation System

515 E. Park Ave., Tallahassee, FL, 32301

850-205-8842

CD 119 TAURUS MEZZ, LLC**Thank you!**

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	
Registration	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input checked="" type="checkbox"/> CUS
New Registration		
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
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9/29/2014

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Order#:
9292480

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TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF
FLORIDA:

SECTION I:	
1. Name of Foreign Limited Liability Company: Taurus CD 119 Mezz MM, LLC	
2. Jurisdiction under the Law of which the Foreign LLC is organized: Delaware	
3. FEIN (if applicable): N/A	
4. Date First Transaction Business in Florida (if prior to registration): N/A	
5. Street Address of Principal Office: 610 North Wymore Road, Suite 200, Maitland, Florida 32751	
6. Mailing Address: 610 North Wymore Road, Suite 200, Maitland, Florida 32751	
7. Name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name: Jeffrey K. McFadden Title: Manager Address: 610 North Wymore Road, Suite 200, Maitland, Florida 32751	
8. Attached is an original certificate of existence, no more than ninety (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.)	
<div style="display: flex; justify-content: space-between;"><div>Signature Authorized Representative of a Member: <i>John Kingman Keating</i> John Kingman Keating, Authorized Representative (In accordance with section 605.0203, F.S., the execution 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 document to the Department of State constitutes a third degree felony as provided for in Section 817.155, F.S.)</div><div>Date: <u>9/27/14</u></div></div>	

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TALLAHASSEE, FLORIDA

**REGISTERED AGENT CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE AND ACCEPTANCE**

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.

Taurus CD 119 Mezz MM, LLC, a Delaware limited liability company (the "Company") desiring to obtain authorization to transact business in Florida as a foreign limited liability company hereby names and designates Linda G. Kassof as its Registered Agent to accept service of process within the State of Florida with its registered office located at 610 North Wymore Road, Suite 200, Maitland, Florida 32751.

ACKNOWLEDGMENT

Having been named as Registered Agent and to accept service of process for the above stated 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.

DATED this 26th day of September, 2014.


Linda G. Kassof
Registered Agent

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TALLAHASSEE, FLORIDA

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TAURUS CD 119 MEZE MM, 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 TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2014.

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


AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TAURUS CD 119 MEZE MM, LLC" WAS FORMED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2014.

5602402 8300

141220118

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1728692

DATE: 09-25-14

State of Delaware
Secretary of State
Division of Corporations
Delivered 12:14 PM 09/12/2014
FILED 12:09 PM 09/12/2014
SRV 141172326 -- 5602402 FILE

**CERTIFICATE OF FORMATION
OF
TAURUS CD 119 MEZZ MM, LLC,
a Delaware limited liability company.**

This Certificate of Formation of Taurus CD 119 Mezz MM, LLC, a Delaware limited liability company (the "Company"), dated as of the 10th day of September, 2014, is being duly executed and filed by John Kingman Keating, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. §18-101, *et seq.*).

ARTICLE I - NAME

The name of the limited liability company formed hereby is *Taurus CD 119 Mezz MM, LLC* (the "Company").

ARTICLE II - REGISTERED OFFICE

The address of the registered office of the Company in the State of Delaware is National Registered Agents, Inc., 160 Greentree Drive, Suite 101, Dover, Delaware 19904.

ARTICLE III - REGISTERED AGENT

The name and address of the registered agent for service of process on the Company in the State of Delaware is National Registered Agents, Inc., 160 Greentree Drive, Suite 101, Dover, Delaware 19904.

IN WITNESS WHEREOF, the undersigned Authorized Person does hereby execute and file this Certificate of Formation declaring and certifying that the facts stated herein are true, as of the date first above written.


John Kingman Keating