Florida Department of State

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Foreign Limited Liability Company SWI-DE, LLC

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Corporate Filing Menu

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10/10/2014

N. Brillenn OOT

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

FOREIGN LIMITED LIABILITY	IN 003.0902, PLORIDA STATUTES, THE FOLLO COMPANY TO TRANSACT BUSINESS IN THE STA			
1SWI-DE, LLC				
(If name unavailable, enter alternate no Liability Company," "L.L.C," or "LLC	ne adopted for the purpose of treasacting business in Florid	a. The alternate name must include "Limited		
2. Delaware	3.			
(Jurisdiction under the law of which company is organized)	oreign limited liability (FE)	number, il applicable)		
4. Upon	late first the sacted business in Florida, if prior to registration of 505.0904 & 605.0905, F.S. to determine penalty II	on.)		
	ien, Connecticut 06820	toury		
J				
	(Street Address of Principal Office)			
6 20 Thorndal Circle, Dar	en, Connecticut 06820			
·		<u> </u>		
	(Mailing Address)			
	· ·			
7. The name, title or capacity	and address of the person(s) who has/have a			
SWI-DE Holdings, LLC, M	mber - 20 Thorndal Circle, Darien, Conn	ecticut 06820		
having custody of records in t acceptable. If the certificate is must be submitted) SWI-D	ficate of existence, no more than 90 days old be jurisdiction under the law of which it is or in a foreign language, a translation of the cerest Holdings, LLC, Member ward Romanow, Chief Financial Officer of Member Silvers	ganized. (A photocopy is not tificate under oath of the translator		
In accordance with section 605.0203, F.S., an aware that any filse information submitte	Signature of an authorized person acception of this document constitutes an affirmation under the in a document to the Department of State constitutes a third degr	punalties of perjury that the facts stated herein are true, (on felony as provided for in s.817.155, F.S.)		
	Howard Romanow			
	Typed or printed name of signee			

Statutes.

CT Corporation System

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.

If unavailable,	the alternate to be use	d in the state of Florida is:	
2. The name a	nd the Florida street a	ddress of the registered agent and office are:	SCUE SALLES
	CT Corporation Syste	nm	
		(Name)	33. O
	1200 Pine Island Roa	d, Suite 250	E S
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		TALE Johnson
	Plantation	FI. 33324	32°
		City/State/Zip	

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

Angel Nunez

Assistant Secretary

accept the obligations of my position as registered agent as provided for in Chapter 605, Florida

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "SWI-DE, 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 TENTH DAY OF OCTOBER, A.D. 2014.

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

5600904 8300

141279134

You may Perify this certificate online

AUTHENTS CATION: 1769761

DATE: 10-10-14