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IALLAHASSEE, FLORIDA

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	INC. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666						
	WALK IN						
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英	РНОТОСОРУ						
Ŕ	CUS $CS$ $(x2)$						
×	FILING Foreign LLC						
1.	TerraCap GP III, LLC						
	(CORPORATE NAME AND DOCUMENT #)						
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#### **COVER LETTER**

TO: Registration Section

Division of Corporations				
SUBJECT: TerraCap GP III, 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:				
Kevin A. Denti, Esquire				
Name of Person				
Kevin A. Denti, P.A.				
Firm/Company				
2180 Immokalee Road - Suite #316				
Address				
Naples, Florida 34110				
City/State and Zip Code				
kdenti@dentilaw.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Kevin A. Denti, Esquire 239 260-8111				
Name of Contact Person Area Code Daytime Telephone Number				
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:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc				
¥135.—				

### 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: 1 TerraCap GP III, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LL.C.," or "LLC.") (if name unwritishte, enter sterrate 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 (Date first transacted business in Plorida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 23421 Walden Center Drive-Suite #300 Bonita Springs, Florida 34134 (Street Address of Principal Office) 6 23421 Walden Center Drive-Suite #300 Bonita Springs, Florida 34134 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are. Walter S. Hagenbuckle, Manager Robert Gray, Manager 23421 Walden Center Drive-Suite #300 23421 Walden Center Drive-Suite #300 Bonita Springs, Florida 34134 Bonita Springs, Florida 34134 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 accurriance with section 605.0000, F.S., the execution of this document obsettions an affirmation under the pareities of perjury that the facts stated lensin are true, I am aware that any false information submitted in a document to the Department of State constitutes a faired degree follows as provided for in a \$17.155, F.S.)

Robert Gray

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.

	The Limited Liability of GP III, LLC	Company is:		
If unavailable, t	he alternate to be used	in the state of Florida is:		
2. The name an	nd the Florida street ad	dress of the registered agent and office are:		
	Kevin A. De	nti, Esquire		
		(Name)	- 14 SEE	
	2180 lmmok	alee Road - Suite #316	LLAHASS	
	Florida Str	eet Address (P.O. Box NOT ACCEPTABLE)	49 VSSI VSSI	Spare.
	Naples	34110 FL	ANIO:	122.00
		City/State/Zip	12 TATE DRIDA	<sup>™</sup> ° <b>E</b> +4.

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)

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "TERRACAP GP III 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 ELEVENTH DAY OF DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TERRACAP GP III LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2014.

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

14 DEC 49 AM IO: 12
SECRETARY OF STATE
AND AN ASSETE, FLORIDA

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AUTHENT CATION: 1947812 DATE: 12-11-14

jeffrey W Bullock, Secretary of State

You may varify this cartificate online at corp.delaware.gov/authver.shtml