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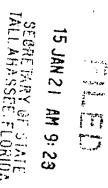
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Lucas RVP 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.") 2. Virginia company is organized) March 2014 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) .no-office in flor (Street Address of Principal Office) ₆ PO BOX 189 Free Union, VA 22940 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Matthew Lucas, Manager, PO BOX 189 Free Union, VA 229 Tricia Lucas, Manager, PO BOX 189 Free Union, VA 229 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, F.S. /the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I

Matthew Lucas

Typed or printed name of signee

um aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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.

| i The name of the camiled Gaointy Combany i | ame of the Limited Liability C | ompany is |
|---|--------------------------------|-----------|
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Lucas RVP LLC

If unavailable, the alternate to be used in the state of Florida is:

Lucas RVP FL LLC

2. The name and the Florida street address of the registered agent and office are:

| Jacques Carlon | | |
|--|-------------|--|
| (1 | Nume) | |
| 13900 Jog Road | Ste 203-116 | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | | |
| Delray Beach | 33446 TL | |

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 provision of educations of the proper and complete performance of my duties, and I am familiar with find accept the obligations of my position as registered agent as provided for in Chapter 605, Fiftigues.

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

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Lucas RVP LLC is duly organized as a fimited liability company under the faw of the Commonwealth of Virginia;

That the date of its organization is January 12, 2014; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

15 JAN 21 AH 9: 23
SEBRETARY OF STATE
TALLAHASSEE FLORIG

Signed and Sealed at Richmond on this Date:

January 21, 2015



Joel H. Peck, Clerk of the Commission

Document Control Number: 1501215385