(1/5)

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Florida Department of State

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Foreign Limited Liability Company Cholla 3800 LLC

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Corporate Filing Menu

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COVER LETTER

	stration Section tion of Corporations	
SUBJECT:	Cholla 3800 LLC	
		ne of Limited Liability Company
The enclosed Existence, and	"Application by Foreign Limited Liah d check are submitted to register the al	bility Company for Authorization to Transact Business in Florida," Certificate o above referenced foreign limited liability company to transact business in Florids
Please return	all correspondence concerning this ma	after to the following:
	Maureen Farrell	
		Name of Person
	Seyfarth Shaw LLP	
		Finn/Company
	131 South Dearborn Street, Suite	2400
		Address
	Chicago, 1L 60603	
		City/State and Zip Code
	mfarrell@seyfarth.com	
	E-mail address:	i: (to be used for future annual report notification)
For further in	formation concerning this matter, please	ase call:
Mau	reen Farrell	at (312) 460-5712 Area Code Daytime Telephone Number
	Name of Contact Person	Area Code Daytime Telephone Number
Divis Regis P.O.	LING ADDRESS: tion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS; Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	a check for the following amou 25.00 Filing Fee \$\simeq\$\$\\$130.00 Filing Certificate of	ng Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate

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:

1. Cholla 3800 LLC					
(Name of Foreign Limited Liability Company; must in	iclude	"Limited Liability Company," "L.L.C.," or "LI	<i>ድ.</i> ግ		
(If name unavailable, enter alternate name adopted for the purpose of Liability Company," "LLC," or "LLC.")	Firan	sacting business in Florida. The alternate name	must include	: "Limite	ad
2 Delawere	3.	47-2463039			
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)			
4. N/A					
(Date first transacted business (See sections 605,0904 & 605,09		onda, if prior to registration.) .S-10 determine penalty liability)			
5. 400 North Michigan Avenue, Suite 800					
Chicago, IL 60611					
(Street Add	ress o	f Frincipal Office)			
6. 400 North Michigan Avenue, Suite 800			25- ç.s		
Chicago, IL 60611				2 2	
(M	ailin	(Address)	53.44	20	7
7. The name, title or capacity and address of the p	erco	m/e) who hos/hove authority to mana	oe islate:	2	Chicago.
7. The lame, the or capacity and address of the p	Ç13C	may who mashavo address; to make		_	i
Cholla L3 Venture I LLC - Member	_		ر ان ال	3	
400 North Michigan Avenue, Suite 800			S S	ن	
Chicago, IL 60611			TE N	7	
8. Attached is an original certificate of existence, n having custody of records in the jurisdiction under acceptable. If the certificate is in a foreign language must be submitted) Signature of the accordance with section 605.0203, F.S., the execution of this document am aware that any false information submitted in a document to the Departure.	the e, a f an	law of which it is organized. (A phot translation of the certificate under or authorized person tutes an affirmation under the penalties of perjuty that	the of the	not transla	ator
Gregory D. Schott					
	ited	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.

	of the Limited Liability Compa	any is:		
	le, the alternate to be used in the	state of Florida is:		
N/A		<u> </u>		
2. The name	e and the Florida street address o	of the registered agent and office are	: :	
	C T Corporation System			
		(Name)		
	1200 South Pine Island Road		بن رفن م جلاً	
	Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)		5
	Plantation	FL 33324		MAR -
		City/State/Zip	2000 2000 2000 2000 2000 2000 2000 200	2
liability com registered a statutes rela accept the o	pany at the place designated in t gent and agree to act in this capa ting to the proper and complete p	to accept service of process for the a his certificate, I hereby accept the a icity. I further agree to comply with performance of my duties, and I am J stered agent as provided for in Chap	ppointment as the provisions of all amiliar with and	AM 9: 13
Statutes.	C T Corporation System By:	an My	James M. H Assistant Secr	•
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agen Certified Copy (optional) Certificate of Status (optional)	t	

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHOLLA 3800 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 SECOND DAY OF MARCH, A.D. 2015.

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

150298299

You may worify this cortificate online at corp.dolaware.gov/authvor.shtml

DATE: 03-02-15