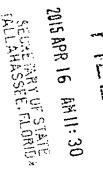
#11/5000002819

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
ı		
		}
		Į.

Office Use Only



600271337136



RECEIVED OF STATE

15 APR 16 PH 4: 23

KSALY EXAMINER APR 17 2015 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 588031 8043641

AUTHORIZATION : Spelle Blend

COST LIMIT : \$'125.00

ORDER DATE: April 14, 2015

ORDER TIME : 1:13 PM

ORDER NO. : 588031-005

CUSTOMER NO: 8043641

FOREIGN FILINGS

NAME: AVAIL 1 LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Avail 1 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:				
James Fratangelo				
Name of Person				
Avail 1 LLC				
Firm/Company				
2100 Ponce De Leon Blvd., Suite 720				
Address				
Coral Gables, FL 33134				
City/State and Zip Code				
JimFratangelo@assetsrc.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
James Fratangelo 301 346-2000				
Name of Contact Person Area Code Daytime Telephone Number				
MAILING ADDRESS: Division of Corporations 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:				
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy				

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 Avail 1 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.I. C," or "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 4. April 13, 2015 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 2100 Ponce De Leon Blvd., Suite 720, Coral Gables, FL 33134 (Street Address of Principal Office) 6, 2100 Ponce De Leon Blvd., Suite 720, Coral Gables, FL 33134 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: James Fratangelo, on behalf of Avail Holding LLC as manager of Avail 1 LLC 2100 Ponce De Leon Blvd. Suite 720, Coral Gables, FL 33134 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 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s \$17.155, F.S.) James Fratangelo

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.

Avail 1	of the Limited Liability Company is:	
If unavailable,	the alternate to be used in the state of Florida is:	
2. The name a	and the Florida street address of the registered agent and office are:	2015 APR
James Fratangelo		APR 16
	2100 Ponce De Leon Blvd., Suite 720	AHII: 30
	Florida Street Address (P.O. Box NOT ACCEPTABLE) Coral Gables FL 33134	30 30 30
	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 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

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

DACE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "AVAIL 1 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 TWENTIETH DAY OF MARCH, A.D. 2015.

5706227 8300

150389292

AUTHENTY CATION: 2220746

DATE: 03-20-15

You may varify this certificate online at corp.delaware.gov/suthvar.shtml