

05/29/2015

Division

0001/0003

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Florida Department of State

Division of Corporations
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Division of Corporations

Fax Number : (850) 617-6383

From:

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Account Number : I20030000004

Phone : (407) 835-6769

Fax Number : (407) 843-4076

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Foreign Limited Liability Company
MFP ESPERANZA TIC, LLC

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TALLAHASSEE, FLORIDA

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN 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. MFP Esperanza TIC, LLC.

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," "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.," "LLC.")2. Delaware(Jurisdiction under the law of which foreign limited liability
company is organized)

3. _____

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

3250 Mary Street, Ste. 306

5. _____

Miami, FL 33133

(Street Address of Principal Office)

3250 Mary Street, Ste. 306

6. _____

Miami, FL 33133

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Carol Ogden

Office Address:

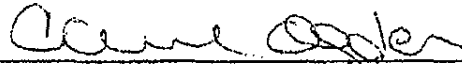
3250 Mary Street, Ste. 306Miami

(City)

Florida 33133

(Zip code)

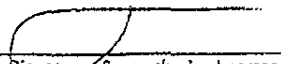
Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this
application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of
my position as registered agent.

(Registered agent's signature)

Carol Ogden

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Paul R. Steinfurth, Manager, 3250 Mary Street, Ste. 306, Miami, FL 331339. Attached is a 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. (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.817.155, F.S.)Paul R. Steinfurth

Typed or printed name of signer

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MFP ESPERANZA TIC, 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 TWENTY-EIGHTH DAY OF MAY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MFP ESPERANZA TIC, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2015.

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

5753946 8300

150810015

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2416469

DATE: 05-28-15

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