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(F	Requestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	Certificates of	Status		
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 619110 7670566

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AUTHORIZATION : Symbolic man

COST LIMIT : \$ 125.00

ORDER DATE: May 6, 2015

ORDER TIME : 3:58 PM

ORDER NO. : 619110-035

CUSTOMER NO: 7670566

#### FOREIGN FILINGS

NAME: BROOKFIELD GLOBAL INTEGRATED

SOLUTIONS US LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

X PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

### 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:

Brookfield Global Int	egrated Solutions US.LLC		
(Name of For	eign Limited Liability Company; must incl	ude "Limited Liability Company," "L.	L.C.," or "LLC.")
(If name unavailable, enter a Liability Company," "L.J.C.	Iternate name adopted for the purpose of tr	ansacting business in Florida. The alte	rnate name must include "Limited
2. Delaware	3	61-1760801	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if a	opticable)
4	(Date first transacted business in I (See sections 605,0904 & 605,0905,	Florida, if prior to registration.) F.S. to determine penalty liability)	<del>.</del>
5. 250 Vesey Street, 15t	<u></u> जैं		
New York, NY 1028			
6. 250 Vesey Street, 15th	(Street Address of Princip Floor	nal Office)	
New York, NY 1028	1-1023		استر الآن الا
	(Mailing Addre	ss)	
7. Name and street address	s of Florida registered agent: (P.O. Be	ox NOT acceptable)	\$ P
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahassee (City)	, Florida <u>3230</u>	1
this application, I hereby with the provisions of all the obligations of my posi	gistered agent and to accept service of accept the appointment as registered a statutes relative to the proper and contition as registered agent.  Corporation Service Company  By:	agent and agree to act in this capi uplete performance of my duties, to 1_01	acity. I further agree to comply
8. The name, title or capa	acity and address of the person(s) who	has/have authority to manage is/are	2:
See attached.			
	of existence, no more than 90 days old of which it is organized. (If the certific abmitted)		slation of the certificate under oath
	Signature of an	authorized person	
	n 605.0203, F.S., the execution of this		on under the penalties of perjury that Department of State constitutes a thi

Typed or printed name of signee

degree felony as provided for in s.817.155, F.S.)

Andrew McLachlin, Manager

#### Brookfield Global Integrated Solutions US LLC

Managers:

Name:

Business Address:

Barry Blattman, Manager

Business:

250 Vesey Street, 15<sup>th</sup> Floor

New York, NY 10281-1023

Jordan Kolar, Manager

Business:

250 Vesey Street, 15th Floor

New York, NY 10281-1023

Mark Weinberg, Manager

Business:

250 Vesey Street, 15th Floor

New York, NY 10281-1023

Andrew McLachlin, Manager

Business:

7400 Birchmount Road

PO Box 4800

Markham, Ontario, L3R 4E6

Canada

15 JUN -4 PH 12:1

## Delaware

PAGE 3

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "BROOKFIELD GLOBAL INTEGRATED

SOLUTIONS US 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 FOURTH DAY OF

JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BROOKFIELD GLOBAL INTEGRATED SOLUTIONS US LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2015.

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

15 JUN -4 PH IZ: OF

5721224 8300

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AUTHENTICATION: 2435386

DATE: 06-04-15

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