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(((H150001794973)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: KATZ, BARRON, SQUITERO AND FAUST

Account Number : 072627002473

Phone

: (305)856-2444

Fax Number

: (305)285-9227

\*\*Enter the email address for this business entity to be used of or annual report mailings. Enter only one email address please. \*\*\*

Email Address: Corpco@katzbarron.com

Foreign Limited Liability Company Genesis 319 Holdings, LLC

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Page Count	02
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Help

APPLICATION BY FO	REIGN LIMITE	D LIABILITY COMPAN IN FLORI	IY FOR AUTHORIZATION T DA	O TRANSACT BU	siness
N COMPLIANCE WITH SECT DOMPANY TO TRANSACT BU	TION 605,0902, FLOR SINESS IN THE STAT	IDA STATUTES, THE FOLLO 'EOF FLORIDA:	WING IS SUBMITTED TO REGISTE!	RA FOREIGN LIMINE	O LUBILI
Genesis 319 Holdings, 1	LLC				_
(Name of Fore	ign Limited Liability	Company; must include "Lis	nited Liability Company," "L.L.C.,"	or "LLC.")	
If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted	i for the purpose of transactiv	g business in Florida. The alternate	name must include "Li	mited
Delaware	•	3. 47	-4603045		
(Jurisdiction under the law company is organized)	of which foreign lim	ited liability	(FEI number, if applica	6le)	
. company is organizous				₩., ~	
4	(Date first to	unsuoted business in Florida, 05.0904 & 605.0905, P.S. to	if prior to registration.)	2015 SEC ALL	
450 NE 5th Street, #53		05.0904 & 605.0905, P.S. to	determine ponalty liability)		423
5. 43011230104000, 1133			<u></u>		- Marien
Fort Lauderdale, FL 3				23	limite 1
(Street Address of Principal Office)			F	T	
6. 450 NB 5th Street, #53	•			— ES - 6	
Fort Lauderdale, FL 3	3301			PATE OF OFFI	
		(Mailing Address)		- Σ΄ ω	
7. Name and street address	<u>ss</u> of Florida regist	ered agent: (P.O. Box NO	<u>)T_acceptable)</u>		
Name:	Corpco, Inc.				
	2699 S. Bayshor	Drive, 7th Floor	<del></del>		
Office Address:			32133		
	Miami	(City)	, Florida 33133	<del></del>	
Registered agent's accep	tance:	• •	<b>(1)</b>	•	
Baving been named as 7	ष्ट्रांडास्टर्स वहस्ता का	to accept service of proc	ess for the above stated corpord	flor at the place day	ignated i
this application, I hereby with the provisions of all	accept the appoin stances relative to	iment as registerea ageni The proper and complete	and agree to eat in this capacity performance of my duties, and	i, xyanner ugree to I am famillar with a	क्षत्र कट्टहा स्थान
the obligations of my pos	ition as registered	agent.			
	allen	La Tulione			
	ONA	(Registique) agent's	eignaturo)		**
	=	of the person(s) who has/h	ave authority to manage is/are;		•
2 .The name, title or cap	acity and amuress c	• 12			
8. The name, title or cap Jeffrey LaTulippe, Presid	A			<del></del> , .	
Jeffrey LaTulippe, Presid	A			r e	
	ent			1	

Signature of an authorized person

(flus document in executed, if accordance with section 605,0203 (1) (b), Florida Statutes, I am award that any false information submitted in a document of the Department of State constitutes a third-degree felony as provided for mis 817-155, F.S.

\* Reffrey LaTulippe

Signatur of an authorized person

it in Andle No. ((ELI5000179497 3)))

of the translator must be submitted).

Fax Audit No. (((H15000179497 3)))

## Delaware

PAGE 3

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GENESIS 319 HOLDINGS, 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-FIRST DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GENESIS 319 HOLDINGS, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JANUARY, A.D. 2015.

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

Fax Audit No. (((H15000179497 3)))

5673340 8300

151073531

You may verify this certificate online at corp.delaware.ouv/authros.shtml

Jeffrey W. Bullock. Secretary of State
AUTHENTICATION: 2574460

DATE: 07-21-15