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A''6 1 9 2015 T. HAMPTON

#### **COVER LETTER**

	stration Section sion of Corporation	s				
SUBJECT:	Sunnyview Investme	ent, L.L.C.				
Sebuci.		Name of I	Limited Liability (	Company	<b>4</b>	<del>-</del>
		eign Limited Liability Comp I to register the above refere				
Please return	all correspondence co	oncerning this matter to the	following:			
	David S. Lang		,			
		Na	ame of Person		***************************************	-
	Rosenblum Gol	denhersh				
Firm/Company						<del>-</del>
	7733 Forsyth Blvd., 4th Floor					
			Address			
	St. Louis, MO 6	3105				•
		City/Si	tate and Zip Code			•
	dlang@rgsz.com					
		E-mail address: (to be used	for future annual	report not	ification)	-
For further inf	ormation concerning	this matter, please call:				
Davi	d S. Lang		314 at (	726-686	= =	
	Name of	Contact Person	Area Code	Day	time Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301		
	check for the followi 25.00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co	

### 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 RUSINESS IN THE STATE OF FLORIDA:

Name of For	, L.L.C.			
(Name of Pon	eign Limited Liability Cor	mpany; must include "Limi	ted Liability Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter a Liability Company," "L.L.C,		the purpose of transacting	business in Florida. The alternate nam	e must include "Limited
2. Missouri		3. 20-385		
(Jurisdiction under the law company is organized)	of which foreign limited	liability	(FEI number, if applicable)	
4. September 1, 2015	(Date first transa	cted business in Florida, if	prior to registration	-
5. 1401 Wewatta St., Uni	(See sections 605.0	1904 & 605.0905, F.S. to de	stermine penalty liability)	
Denver, Colorado 802				
6. 7733 Forsyth Blvd., 4th		Address of Principal Office)		
6. <u>//33 Polayth Biva., va</u>				-
St. Louis, Missouri 63	105	**************************************		TAE 15
		(Mailing Address)		59 = "
7. Name and street addres	ss of Florida registered	agent: (P.O. Box NOT	acceptable)	
Name:	CT Corporation Syste	ems		10 A
Office Address:	1200 S. Pine Island Road			PH 1:3
	Plantation		, Florida 33324 (Zip code)	图 3
		(City)	(Zin code)	D.M.
		nagent semilag of hypoges		at the place designated
Having been named as re this application, I hereby with the provisions of all	gistered agent and to a accept the appointmen statutes relative to the	it as registered agent an proper and complete pe	for the above stated corporation d agree to act in this capacity. If rformance of my duties, and I am	urther agree to comply
Having been named as re this application, I hereby with the provisions of all	gistered agent and to a accept the appointmen statutes relative to the ition as registered agen	nt as registered agent an proper and complete per nt. 4 Page For	for the above stated corporation d agree to act in this capacity. If rformance of my duties, and I am	urther agree to comply
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## 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.

1. The name of	of the Limited Liability Cor	npany is:	
Sunnyvie	ew Investments LLC		
If unavailable,	, the alternate to be used in	the state of Florida is:	
2. The name a	and the Florida street addres	ss 61 the registered agent and office are:	<u> </u>
	C T Corporati	on System	
		(Name)	
	1200 South Pi	ne Island Road	
	Florida Street A	Address (P.O. Box NOT ACCEPTABLE)	
	Plantation,	FL 33324	
		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.

When Like (Signature)

Katherine Lackey, Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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SECRETARY OF STATE

STATE OF MISSOURI



# Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Sunnyview Investment, L.L.C. LC0698257

was created under the laws of this State on the 15th day of November, 2005, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 14th day of August, 2015.

Secretary of State

Certification Number: CERT-08142015-0070