MS00007593

(Re	equestor's Name)			
(Ac	ldress)			
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(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bı	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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2015 SEP 23 A II: 07
SECRETARY OF STATE
ALLAHASSEE, FLORIOA

FILED

SEP 2 4 2015 J. BRUCE CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 792973

AUTHORIZATION

COST LIMIT :

ORDER DATE: September 22, 2015

ORDER TIME: 3:49 PM

ORDER NO. : 792973-025

CUSTOMER NO: 7149687

FOREIGN FILINGS

NAME: FOREST CITY EMPLOYER, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ___ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62935

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporation	as					
SUBJE	Forest City Employe	er, LLC					
Denez	.011	Name of I	imited Liability (Company		•	
		eign Limited Liability Comp d to register the above refere					
Please	return all correspondence o	concerning this matter to the	following:				
		N:	ame of Person		· · · · · · · · · · · · · · · · · · ·	-	
		Fi	rm/Company		***************************************	-	
			,,				
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			Address				
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		City/S	tate and Zip Code	;		-	
					-T	6.7	
		E-mail address: (to be used	for future annua	report not	ification)	2015	
For fur	ther information concerning	g this matter, please call:			AHA HA	£P	
					SSE	23	
			_ at ()	<u> </u>	_	
	Name	of Contact Person	Area Code	e Day	time Telephone Number	^ =:	0
	MAILING ADDRESS:			STREET	ADDRESS: DE	<u> </u>	
	Division of Corporations		•		of Corporations	0	
	Registration Section				ion Section		
	P.O. Box 6327			Clifton E			
	Tallahassee, FL 32314				ecutive Center Circle see, FL 32301		
				r grigging?	roo, I'Li 34301		
Enclos	ed is a check for the follow						
	☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee &	□ \$155.00 Fili		☐ \$160.00 Filing Fee, 0		:
		Certificate of Status	Certified Core	,	of Status & Certified Co	กกร	

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. Forest City Employer,	LLC eign Limited Liability Company; must i	include "Limited	Liability Come	any ""]] ("	or "I I C ")		
(Name of For	eign Entitied Elabinity Company, must i	moluge Limitet	Liaomty Compe	шу, Е.Е.С.,	or LLC.)		
Liability Company," "L.L.C,	Itemate name adopted for the purpose of "LLC.")	of transacting bu	siness in Florida.	. The alternate i	name must includ	e "Limite	ed.
2. Delaware		3.					
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI num	nber, if applicat	ole)		
4	(Date first transacted business	in Florida, if pri	ior to registration	r.)			
5. 50 Public Square, Suit	(See sections 605.0904 & 605.09 te 1360	905, F.S. to deter	mine penalty liab	bility)			
Cleveland, Ohio 44112	3						
	(Street Address of Pri	ncipal Office)					
6.		,			A SE	2011	
o					CRE LAH	2015 SEP	T
-	(Mailing Ad	dress)			— ASE	23	-
7. Name and street addres	ss of Florida registered agent: (P.O.	. Box <u>NOT</u> ac	ceptable)		6.43 8.53		
Name:	Corporation Service Company				FLOO	A ::	C
Office Address:	1201 Hays Street				ORIO	0	
	Tallahassee		, Florida	32301			
	(City)		,	(Zip code)			
Registered agent's accep			4 1				
	gistered agent and to accept service accept the appointment as register						
with the provisions of all	statutes relative to the proper and	complete perfe					
the obligations of my posi	ition as registered agent. Corporation Service Company	Ma	١٨		Courtney	Willia	ms
	Ву:	Gill	<i>X</i>		Asst. Vice		
	(Register	ed agent's signa	ture)	,	1551. VICE	1 10310	20110
8. The name, title or cap:	acity and address of the person(s) w	ho has/have at	uthority to man	age is/are:			
	ties Corporation, its Managing Men		•				
50 Public Square, Suite 1	360, Cleveland, Ohio 44113						
	am		foreign languag				
This document is executed submitted in a document to	d in accordance with section 605.02 the Department of State constitute	03 (1) (b), Flores a third degre	rida Statutes. I : e felony as prov	am aware that vided for in s.	any false inform 817.155, F.S.	nation	
	Amy Bird, Authorized Person	_	-				

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FOREST CITY EMPLOYER, 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-SECOND DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FOREST CITY EMPLOYER, LLC" WAS FORMED ON THE TWELFTH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

NYS 8

Authentication: 10107996

Date: 09-22-15