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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

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

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## Foreign Limited Liability Company Dade City SS, LLC

Certificate of Status	0
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SEP 28 2015 J. HARRIS

## COVER LETTER

то:	Registration Section Division of Corporation	ns		•	•	
SUBJ	Dade City SS, LLC				•	
		Name of	Limited Liability	Company		
					ansact Business in Florida," Certity company to transact business in	
Please	return all correspondence	concerning this matter to the	following:			
	Richard O'Bri	èn				
		N	lame of Person	··· <del>·····</del>		
	Athena RE Flo	orida, LLC				
		F	irm/Company			
	98 Mill Plain I	Road, Suite 3C				
			Address			
	Danbury, CT	06811				
		City/S	State and Zip Code			
	robrien@athena	realestate.com				
		E-mail address: (to be use	d for future annua	report no	tification)	
For fu	rther information concernir	ng this matter, please call:				
	Richard O'Brien		203 at (	942-27	745	
	Name	of Contact Person	Area Code	Day	vtime Telephone Number	
	MAILING ADDRESS: Division of Corporation Registration Section		·	Division	F ADDRESS: of Corporations tion Section	
	P.O. Box 6327			Clifton B	luilding	
	Tallahassee, FL 32314				ecutive Center Circle see, FL 32301	
Enclos	ed is a check for the follow		CI PLES DO PUE	E e	Ticles on Filing Co. C-4iffer	•to
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9/25/2015 10:00:07 AM From: To: 8506176383( 3/4 )

## 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:

1. Dade City SS, LLC (Name of Fore	ign Limited Liability Company; must include "	Limited Liability Company," "L.L.C.," or	"LLC.")	<u>_</u>
(IC	ternate name adopted for the purpose of transact	the business in Plantide. The alternations	must implyed	Timited
Liability Company," "L.L.C,"	ternate name adopted for the purpose of transact of "LLC.")	ing ousiness in Plonda. The alternate has	ne musi inciuae	Limiteu
2. Delaware	3,			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	)	
4	(Date first transacted business in Florid	n. if prior to registration.)	<del></del>	
s 98 Mill Plain Road, Su	(See sections 605.0904 & 605.0905, F.S.	o determine penalty liability)		
J			-	
Danbury, CT 06811	(Street Address of Principal Of	Tice)		.5
98 Mill Plain Road, Sui	•	,	IALI SEL	
6. Danbury, CT 06811				
Danuary, Ct. VOB11	(Mailing Address)		- ‰≥ r	S F
7. Name and street addres	s of Florida registered agent: (P.O. Box N	OT acceptable)		त्रकार्यकाः -
Name:	C T Corporation System			<b>D</b>
Office Address:	1200 South Pine Island Road	. <u> </u>	- · · · ·	e e
	Plantation	, Florida <u>33324</u>		~
	(City)	(Zip code)	_	
designated in this applical to complywith the provision accept the obligations of n	gistered agent and to accept service of pro- tion, I hereby accept the appointment as re- ons of all statutes relative to the proper and my position as registered agent. C I Corporation System By:	gistered agent and agree to act in th	is capacity. If , and I am fun	urther agree
	(Registered agent's	signature) Hssistant Secre	<i>tary</i>	
•	city and address of the person(s) who has/h	1 110	•	
Richard O'Brien, Manager		•	· · · · · · · · · · · · · · · · · · ·	
98 Mill Plain Road, Suite	3C		<del></del> -	
Danbury, CT 06811				
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, dule of which it is organized. (If the certificate is abmitted)  Signature of an autho	y authenticated by the official having in a foreign language, a translation of crized person	custody of reco f the certificate	ords in the under oath
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b the Department of State constitutes a third	), Florida Statutes. I am aware that any degree felony as provided for in s.817	y false informat .155, F.S.	ion
	Richard O'Brien, Manager			

Typed or printed name of signee

9/25/2015 10:00:07 AM From: To: 8506176383( 4/4 )

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "DADE CITY SS, 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-FOURTH DAY OF SEPTEMBER, A.D. 2015.

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

Authentication: 10127640

Date: 09-24-15

5832203 8300 SR# 20150258145

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