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(Re	questor's Name)					
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SECRETARY OF STAI ALLAHASSEE, FLORI

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BEPARIMENT OF STAT

OCT 20 2015 J SHIVERS CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE : 836129 4304954

AUTHORIZATION : July Morella

ACCOUNT NO. : I2000000195

COST LIMIT : \$(/1\25/00

ORDER DATE: October 19, 2015

ORDER TIME : 12:07 PM

ORDER NO. : 836129-005

CUSTOMER NO: 4304954

FOREIGN FILINGS

NAME: PTI US DEVELOPMENT SITES I,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	PTI US Development Sites I, LLC			
3000	Name of Limited Liability Company			
The en	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e. and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please	eturn all correspondence concerning this matter to the following:			
	Carla Hines			
	Name of Person			
	Locke Lord LLP			
Firm/Company				
111 Huntington Avenue				
	Address			
	Boston, MA 02199			
	City/State and Zip Code			
	dkasavana@phoenixintnl.com			
	E-mail address: (to be used for future annual report notification)			
For fu	ner information concerning this matter, please call:			
	Carla Hines at (617) 239-0567			
	Name of Contact Person Area Code Daytime Telephone Number			
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			
Enclos	d is a check for the following amount: \$\Boxed{\text{S125.00 Filing Fee}} \Boxed{\text{S130.00 Filing Fee}} \& \Boxed{\text{S155.00 Filing Fee}} \& \Boxed{\text{S160.00 Filing Fee}} \& \Boxed{\text{S160.00 Filing Fee}} \& \Boxed{\text{S160.00 Filing Fee}} \& \Boxed{\text{Certificate}} \& \Boxed{\text{Certified Copy}} \end{\text{S160.00 Filing Fee}} \& \Boxed{\text{S160.00 Filing Fee}} \& \Boxed{\text{Certified Copy}} \end{\text{S160.00 Filing Fee}} \& \Boxed{\text{S160.00 Filing Fee}} \& \Boxed{\text{Certified Copy}} \end{\text{S160.00 Filing Fee}} \& \Boxed{\text{S160.00 Filing Fee}} \&			

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. PTI US Development S (Name of Fore	ign Limited Liability Company: mu	ist include "Limited Liah	oility Company," "L.L.C.," o	or "LLC.")	-
	ternate name adopted for the purpos	se of transacting business	s in Florida. The alternate no	ame must include "Lin	nited
Liability Company," "L.L.C."	or "LLC.")				
2. Delaware		3. 47-5272148	3		
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicabl	(c)	
4	(Date first transacted busin	ess in Florida, if prior to	registration.)		
5. 1001 Yamato Road, St	(See sections 605.0904 & 605	.0905, r.S. to determine	penany naomity)		
Boca Raton, FL 33431					
z same as above	(Street Address of	Principal Office)		TAS	
6. <u>same as above</u>				15 OCT I: SECRETAL NLLAHAS	
***************************************	(Mailing	Address)		CT 19 ETARN HASS	Andreas and the second
7. Name and street addres	s of Florida registered agent: (P	O. Box NOT accept	abie)	RY SSE	· Shear
Name:	Corporation Service Company	·	_		
Office Address:	1201 Hays Street			7: 26 STATE LORID,	
	Tallahassee		. Florida 32301	_ > > _ w.	
Registered agent's accep	(City)		(Zip code)		
this application, I hereby	gistered agent and to accept ser accept the appointment as regis statutes relative to the proper an tion as registered agent. Corporation Service Compai By:	stered agent and agree ad complete performa	e to act in this capacity. nce of my duties, and I a	I further agree to co	mply
	(Regis	tered agent's signature)	Asst.	Vice President	
8. The name, title or capa	icity and address of the person(s)) who has/have author	ity to manage is/are:		
Dagan T. Kasavana, Auth	orized Person				
1001 Yamato Road, Suite	311	,	,		
Boca Raton, FL 33431					
	of existence, no more than 90 de of which it is organized. (If the c abmitted)		n language, a translation		
	Şignaturo	of an authorized person	1		
	in accordance with section 605. the Department of State constitu				•

Typed or printed name of signee

Dagan T. Kasavana

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PTI US DEVELOPMENT SITES I, 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-NINTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PTI US DEVELOPMENT SITES I, LLC" WAS FORMED ON THE SIXTEENTH DAY OF SEPTEMBER, A.D. 2015.

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

GRETARY OF STATE LAHASSEE, FLORIDA

Jeffrey W. Buffock, Secretary of State

Authentication: 10152206

Date: 09-29-15

5825689 8300 SR# 20150312175

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