Florida Department of State

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Foreign Limited Liability Company **OCSIF Three LLC**

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Corporate Filing Menu

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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: QCSIF Three LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Daniel W. Krausz
Name of Person
QCSIF Three LLC c/o IEQ Management Inc.
Firm/Company
300 Delaware Avenue, Suite 210
Address
Wilmington DE 19801
City/State and Zip Code
dkrausz@krauszco.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniel W. Krausz at (302) 352-9486
Daniel W. Krausz at (302) 352-9486 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsize \\$125.00 \text{ Filing Fee} \Bigsize \\$130.00 \text{ Filing Fee & Certificate} \text{Certificate of Status} \text{Certified Copy} \text{\$\Bigsize \\$155.00 \text{ Filing Fee & Certified Copy}} \Bigsize \\$160.00 \text{ Filing Fee, Certificate} \text{of Status & Certified Copy}

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:

(Mailing Address) (Mailing Addr	Company is organized Clare first transacted business in Florida, if prior to registration.) Clate first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 300 Delaware Avenue, Suite 210, Wilmington DE 19801 (Street Address of Principal Office) Clare to Address of Clare t	If name unavailable, enter alternate name ac Liability Company," "L.L.C," or "LLC.")	lopted for the purpose of transacting	g business in Florida. The alterna	ite name must include "Lim	
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Signature of an authorized person In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated har maware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	in accordance with section 605 0203. F.S. the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated he	in accordance with section 605.0203, F.S., the ex	ecution of this document constitutes at	affirmation under the penaltical of pe	erjury that the facts stated herei	

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 the Limited Liability Company is:	
QCSIF Three LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
C T Corporation System	
(Name)	
1200 South Pine Island Road	٠
Florida Street Address (P.O. Box NOT ACCEPTABLE)	•
Plantation FL 33324	
City/State/Zip	į
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.	
C T Corporation System	
By: Lenier Bell	
(Signature)	
\$ 100.00 Filing Fee for Application	
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	
\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	

Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "QCSIF THREE 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 OCTOBER, A.D. 2015.

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

5842851 8300 SR# 20150611795

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

Authentication: 10285819

Date: 10-22-15