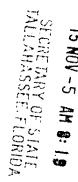
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(Requestor's Name)								
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PICK-UP WAIT MAIL								
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2815 NOY -5 PM 2

NOV - 6 2015 J SHIVERS CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 861716 4304954

AUTHORIZATION : Soulble na

. COST LIMIT : \$\frac{1}{25}.00

ORDER DATE: November 5, 2015

ORDER TIME : 12:53 PM

ORDER NO. : 861716-005

CUSTOMER NO: 4304954

#### FOREIGN FILINGS

NAME: PTI US II, 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 Corporatio	ns						
SUBJE	PTI US II, LLC							
		Name o	f Limited Liability	Company		······································		
		reign Limited Liability Con ed to register the above refe						
Please	return all correspondence	concerning this matter to th	e following:					
	Carla Hines							
		1	Name of Person					
	Locke Lord LL	.P						
		1	Firm/Company					
	111 Huntingto	n Avenue						
	, <del>************************************</del>		Address					
	Boston, MA 02					SEC ALL	15	
		City/	State and Zip Code	•		A 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	AON	* ¥-N3
	dkasavana@pho					SS	5	in the same of the
For furt	her information concernin	E-mail address: (to be use g this matter, please call:	ed for future annua	l report no	tification)	OF STATE.	AM 8: 1	
	Carla Hines		at (_617	239-05	<del>-</del>	<u>9</u> m	Ć	
	Name o	f Contact Person	Area Code	Day	time Telephone Nurr	iber		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tailahassee, FL 32314			Division Registrat Clifton B 2661 Exe	r ADDRESS: of Corporations ion Section building ceutive Center Circle see, FL 32301			
Enclose	d is a check for the follow ☐ \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ng Fee &	□ \$160.00 Filing F of Status & Certifie	-	ficate	

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: PTI US II, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, onter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. Delaware 47-5480045 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penulty limitity) 1001 Yamato Road, Suite 311 Boca Raton, FL 33431 (Street Address of Principal Office) same as above (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) Registered agent's acceptance: Having been named us registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.
Corporation Service Company Melissa Zender By: Asst. Vice President 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Dagan T. Kasavana, Authorized Person 1001 Yamato Road, Suite 311 Boca Raton, FL 33431 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an anthorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware 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. Dagan T. Kasayana

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 "PTI US II, 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 THIRD DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PTI US II, LLC"

WAS FORMED ON THE SECOND DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN

PAID TO DATE.

Authentication: 10348367

Date: 11-03-15

5866825 8300

SR# 20150749656

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