Florida Department of State

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Foreign Limited Liability Company Xcira, LLC

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ATTORNEYS AT LAW 100 NORTH TAMPA STREET. SUITE 2700 TAMPA, FLORIDA 33602-5810 P.O. BOX 3391 TAMPA, FLORIDA 33601-3391 TELEPHONE. 813,229,2300 FACSIMILE: 813.221.4210

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November 3, 2015

Florida Department of State Division of Corporations

Re: Xcira, Inc.

Ladies and Gentlemen:

The undersigned, as Chief Executive Officer of Xcira, Inc., a Florida corporation formed September 26, 1996 (Florida Document No. P96000079933) and converted to a Delaware limited liability company on November 3, 2015 (the "Company"), hereby confirms that it releases the name Xcira, Inc. to Xcira, LLC, a Delaware limited liability company, for purposes of qualifying Xcira, LLC to do business in Florida.

Nancy J. Rabenold, Chief Executive Officer

2015 4:52:13 PM Reconso, Amy E.

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

		IN FLORIDA	ett	,	4	
	CTION 605.0902, FLORIDA STATUTE USINESS IN THE STATE OF FLORID		SUBMITTED TO REGISTER A F	oreign lin	MED LL	ABILITY
, Xcira, LLC				٠		
(Name of Fer	reign Limited Liability Company; mi	ust include "Limited Lis	ibility Company," "L.L.C.," or "	CLC,"		
Liability Company," "L.L.C.	diamate name adopted for the purpo: ," or "LLC,")	se of transacting busine	sa în Florida. The alternate name	must include	: "Limite	:d
2. Delaware		3, 59-3404843				
company is organized)	of which foreign limited liability	· •	(FEI number, if applicable)			
4. Upon filling. Previous	ly conducted business in Florida		_			
	(Date first transacted busin (See sections 605.0904 & 605	ess in Florida, if prior to 1.0905, F.S. to determin	o registration.) ic penalty liability)			
5. 410 S. Ware Boulevar						
Tampa, Florida 33619	(Street Address of					
6. 410 S. Ware Boulevan	•	Principa Unice)		•		
Tampa, Florida 33619						
	. gnilieM)	Address)				
7. Name and street address	a of Florida registered agent: (P.	O. Box NOT accept	mblo)	16.2	υn 	
Name:	Nancy I, Rubenold		_	田名	MON.	, ; ;
Office Address:	410 S. Ware Boulevard, Suite	900	_		ထ	Therefore,
,	Таттре		Florida 33619	12.12 1.13.13 1.13.13	A	1"7"
	(City)		(Zip code)	0.5	Ö	*
Registered agent's accept	tance: Bistered agent and to accept seri	vice of process for th	e above stated limited liabilit	y company (क्षी में e pi	lace
designated in this applicat	lion, i kereby accept the appoint	ment as registered a	gent and agree to act in this	capacity. I j	further i	agred
to complywith the provision	ens of all statutes relative to the	proper and complete	performance of my duties, t	ind I am for	Hiller W	ith and
accept the obligations of n	ny position as registered agent.	/	0			
	1 Karay C	Malerala	<u></u>			
	(Registi	ered agent's signature)				
8. The name, title or caps	city and address of the person(s)	who has/have author	ity to manage is/are:			
Nancy J. Rabenold, Mana	ger, 410 S. Ware Boulevard, Sui	te 900, Tampa, Plori	da 33619, Manager			
James A. Simmons, Mans	iger, 410 S. Ware Bauleyard, Sui	ite 900, Tampa, Flori	da 33619 , Manager			
Karl Werner, Jim Barr, and	d Sharon Driscoll, 4000 Pine Lak	e Road, Lincoln, Ne	braska 68516, Manager	-		
jurisdiction under the law o	of existence, no more than 90 day of which it is organized. (If the co	/s old, duly authentic utificate is in a foreig	ated by the official having cu n language, a translation of th	receptificate	under o	ne veth
of the translator must be sul				•		
	Signature	herold				
	,		•			
This document is executed in submitted in a document to the su	in accordance with section 605.0: the Department of State constitut	203 (1) (b), Florida S es a third degree felo	tatutes. I am aware that any fe ny as provided for In s.817.15	ike informat 5, F.S.	ion	
	Nancy J. Rabenold	_				
	Matich 1. Wrocuoto					



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "XCIRA, 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 THIRTEENTH DAY OF NOVEMBER, A.D. 2015.

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

5866728 8300

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Date: 11-13-15