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NCR National Corporate Research (Hong Kong) Limited, a Hong Kong Limited Company

NCR National Corporate Research (UK) Limited, Registered in England and Wales, Registry # 8010712

Albany • Charlotte • Chicago • Dover • Los Angeles • New York • Sacramento • Springfield • Tallahassee • Washington, D.C. • Hong Kong • London

Date: 12/30/2015 Account #: I20000000088

Name: ERIC HOOD

Reference #: A248792

ENTITY NAME: REPLACEMENT GP FLORIDA, LLC

| Articles of Incorporation/Authorization to Transact Business | | | | | | |
|--|--|--|--|--|--|--|
| Amendment | | | | | | |
| Annual Report | | | | | | |
| Change of Agent | | | | | | |
| Reinstatement | | | | | | |
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| Dissolution/Withdrawal | | | | | | |
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| Authorized Amount: 125.00 Signature: Elder | | | | | | |
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COVER LETTER

| TO: | Registration Section Division of Corporation | ns | | | | | | | |
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| SUBJ | ECT: | Replaceme | nt GP F | lorida, LL | С | | | | |
| | | Name of | Limited | Liability | Company | | | | |
| The en | closed "Application by Fonce, and check are submitted | reign Limited Liability Com ed to register the above refer | pany for enced fo | Authoriz preign lim | ation to T ited liabil | ransact Business in Florida," Certificate of ty company to transact business in Florida | | | |
| Please | return all correspondence | concerning this matter to the | followi | ng: | | | | | |
| | Joanne D. Flanagan | | | | | | | | |
| | | N | ame of | Person | | | | | |
| | ups tt o | | | | | | | | |
| | JDF, LLC Firm/Company | | | | | | | | |
| | | | | | | | | | |
| 340 Pemberwick Road Address | | | | | | | | | |
| | | | Audit | .33 | | | | | |
| | . | Gree | nwich, (| CT 06831 | | | | | |
| | | City/S | tate and | Zip Code | ; | | | | |
| | | | | w.com | | | | | |
| | | E-mail address: (to be used | for fut | ure annua | report no | otification) | | | |
| For fur | ther information concernir | g this matter, please call: | | | | | | | |
| | T | . O D. b | | 000 | | 440.000 | | | |
| | | of Contact Person | at(| 203 Area Code | _) Da | 413-0326 ytime Telephone Number | | | |
| | MAILING ADDDESS | | | | | | | | |
| MAILING ADDRESS: Division of Corporations Registration Section | | | STREET ADDRESS: Division of Corporations Registration Section | | | | | | |
| | | | | | | | | | |
| | P.O. Box 6327 Tallahassee, FL 32314 | | Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | recutive Center Circle | | | |
| Enclos | ed is a check for the follow | ving amount: | | | | | | | |
| □ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status | | ☐ \$155.00 Filing Fee & Certified Copy | | ng Fee & | ☐ \$160.00 Filing Fee, Certificate 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 FOILOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Replacement GP Florida, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (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 penalty liability) 340 Pemberwick Road Greenwich, CT 06831 (Street Address of Principal Office) 340 Pemberwick Road Greenwich, CT 06831 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) National Corporate Research, Ltd., Inc. Name: 115 North Calhoun Street, Suite 4 Office Address: Tallahassee . Florida (City) Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Joanne D. Flanagan, Vice President 340 Pemberwick Road Greenwich, CT 06831 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

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.

of the translator must be submitted)

Joanne D. Flanagan

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 "REPLACEMENT GP FLORIDA, 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 THIRTIETH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REPLACEMENT GP FLORIDA, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2015.

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

THE STATE OF THE S

Authentication: 10706378

Date: 12-30-15

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