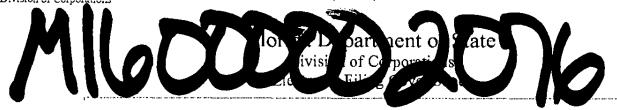
3/11/2016 3:37:27 PM From: To: 8506176383(1/4)



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160000637783)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company RCS - Longwood Maple, LLC

Certificate of Status	1
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Estimated Charge	\$130.00

MAR 1 4 2016

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Corporate Filing Menu

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8506176383(2/4) 3/11/2016 3:37:27 PM From: To:

COVER LETTER

	egistration Section ivision of Corporation	Ons	.*			
SUBJECT	RCS - Longwood					
000001			Limited Liability Con	прапу		
Please retu	rn all correspondence	concerning this matter to the	following:			
	Terri Soucie					
		N	lame of Person			
	Real Capital Solutions, Inc.					
	Firm/Company					
	371 Centennial Parkway, Suite 200				TĂLI 16	
	Address					THE AH
	Louisville, CO	80027				7 7
	City/State and Zip Code					
	tsoucie@realca _l	•				9.
		Name of Limited Liability Company poplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida, "Certificate of teck are submitted to register the above referenced foreign limited liability company to transact business in Florida. correspondence concerning this matter to the following: Terri Soucie Name of Person Real Capital Solutions, Inc. Firm/Company 371 Centennial Parkway, Suite 200 Address Louisville, CO 80027 City/State and Zip Code Isolucie@realcapitalsolutions.com E-mail address: (to be used for future annual report notification) Particular Solucies (Solucies) Area Code Daytime Telephone Number STREET ADDRESS: Loi of Corporations tion Section Ko327 Cittor Building 266 Executive Center Circle Tallahassee, FL 32301				
For further	information concerni	ng this matter, please call:				
Terri Soucie			533-165	8		
41.00	Name	of Contact Person		Dayt	ime Telephone Number	
Di Re P.:	AILING ADDRESS ivision of Corporation egistration Section O. Box 6327 allahassee, FL 32314		Di Re Cl 26	vision o egistratio lifton Bu 61 Exec	of Corporations on Section iilding outive Center Circle	
	a check for the follow \$125.00 Filing Fee	■ \$130.00 Filing Fee &		ee &		

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:

(Name of For	eign Limited Liability Company; must include	· "Limited Liability Company," "L.L.C" or "LLC	.")
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose of trans " or "LLC.")	acting business in Florida. The alternate name mu-	at include "Limited
2. Colorado	3, 1	N/A	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4			
	(Date first transacted business in Flor (See sections 605.0904 & 605.0905, F.	ida, if prior to registration.) S. to determine penalty liability]	
5. 371 Centennial Parkwa		, , ,	
Louisville, CO 80027			
,	(Street Address of Principal	Office)	
371 Centennial Parkwa	y, Suite 200		
Louisville, CO 80027			a Fr
	(Mailing Address)	,	T
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	TO HAR I
	NRAI Services, Inc.	<u>,</u>	5/3 استيني اکار استين (۱۲
Name:			70
Office Address:	1200 South Pine Island Road		5
	Plantation	, Florida 33324	M 9: 03
Registered agent's accept	(City)	(Zip code)	: لد
designated in this applicate to complywith the provision	ion, I hereby accept the appointment as	ocess for the above stated limited liability co registered agent and agree to act in this cape nd complete performance of my duties, and	icity. I further agr
	Xinda "	Daut C1	
	(Registered agon	t's signature) Linda Stauffer, Assistant Secreta	ry
8. The name, title or capa	city and address of the person(s) who has,	/have authority to manage is/are:	
Marcel J.C. Arsenault, Ma	nager, 371 Centennial Parkway, Suite 20	0, Louisville, CO 80027	
Sharon K. Eshima, Manag	er, 371 Centennial Parkway, Suite 200, L	ouisville, CO 80027	
Real Capital Solutions, Inc	., Manager, 371 Centennial Parkway, Su	ite 200, Louisville, CO 80027	
			
 Attached is a certificate of surisdiction under the law of the translator must be su 	f which it is organized. (If the certificate	lly authenticated by the official having custod is in a foreign language, a translation of the co	y of records in the ertificate under oath
	Signature of an auth		
his document is executed ubmitted in a document to	in accordance with section 605.0203 (1) (the Department of State constitutes a third	 b), Florida Statutes, I am aware that any false I degree felony as provided for in s.817.155, F 	information '.S.
	Sharon K. Es	hima	
•	Typed or printed nan	ne of signee	

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

RCS - Longwood Maple, LLC

is a

Limited Liability Company

formed or registered on 03/03/2016 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20161164463.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/01/2016 that have been posted, and by documents delivered to this office electronically through 03/03/2016 @ 10:40:44 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/03/2016 @ 10:40:44 in accordance with applicabled as This certificate is assigned Confirmation Number 9532260



Secretary of State of the State of Colorado

***********************End of Certificate ************************** Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, hup://www.sos.state.co.us/biz/Certificate/SearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://nrwsosstate.coms/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."