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## COVER LETTER

TO:	Registration Division of C		S				
SUBJE		RRANO LLO					
5555	· · · · · · · · · · · · · · · · · · ·		Name of L	imited Liability (	Company		
			ign Limited Liability Comp to register the above refere				
Please r	eturn all corre	spondence co	oncerning this matter to the f	following:			
	Jef	frey C. Steir	nert				
Name of Person						,	
Pepple Cantu Schmidt PLLC							
Firm/Company							
	1000 2nd Avenue, Suite 2950					_	
				Address			
	Sea	attle, WA 98	8104		-		_
City/State and Zip Code					-1 N		
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			E-mail address: (to be used	for future annual	report notifica	tion)	AC PROPERTY OF AN
For furt	her informatio	n concerning	this matter, please call:			6057 C	5   T
	Jeffrey C. S	Steinert		206 at (	625-9984	1.3. 171 171 1.	o co
		Name of	Contact Person	Area Code	Daytime	Telephone Number	=
	MAILING / Division of O Registration P.O. Box 632 Tallahassee,	Corporations Section 27			STREET AD Division of Co Registration S Clifton Buildi 2661 Executiv Tallahassee, F	DRESS: orporations Section ng ve Center Circle	<b>i</b>
Enclose	d is a check fo ■ \$125.00 F		ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy		\$160.00 Filing Fee, C Status & Certified Co	

## 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:

GP SERRANO LLC			
(Name of Fore	eign Limited Liability Company; must include "Limited	Liability Company," "L.L.C.,	," or "LLC.")
If name unavailable, enter al identification in its image is a second control of the control of	Iternate name adopted for the purpose of transacting but	siness in Florida. The alternate	e name must include "Limited
State of Delaware	3.		
	of which foreign limited liability	(FEI number, if application	able)
·	(Date first transacted business in Florida, if pri	or to registration	
	(See sections 605.0904 & 605.0905, F.S. to deter	mine penalty liability)	
5403 West Gray Stre	eet		
Tampa, FL 33609			
	(Street Address of Principal Office)		
2430 Estancia Boule	vard, Suite 114		
Clearwater, FL 3376	51		
	(Mailing Address)		
. Name and street addres	ss of Florida registered agent: (P.O. Box NOT ac	ceptable)	
Name:	Trustee and Corporate Services, Inc.	,	
Office Address:	2430 Estancia Boulevard, Suite 114		T C
Office Address.	Clearwater	33761	
	(City)	, Florida(Zip code	<del></del>
lesignated in this applicate complywith the provision	egistered agent and to accept service of process for ation, I hereby accept the appointment as register from of all statutes relative to the proper and company position as registered agent.  (Registered agent's signal	ed agent and agree to act i olete performance of my di	in this capacity. I further agre
3. The name, title or capa	acity and address of the person(s) who has/have at	thority to manage is/are:	
/lark A. Bullock 🗻 🌈	NGR		
215 S. State Street, Sui	ite 380		
Salt Lake City, UT 841	11		
	of existence, no more than 90 days old, duly auth of which it is organized. (15the certificate is in a fubmitted)	oreign language, a translatio	
	——— ( ) ·		

Typed or printed name of signee

Jeffrey C. Steinert, Agent

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GP SERRANO 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 NINTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GP SERRANO LLC"

WAS FORMED ON THE ELEVENTH DAY OF APRIL, A.D. 2016.

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

Authentication: 202281108

Date: 05-09-16

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SR# 20162955613