#461 P.001/003

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### Florida Department of State

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#### FLORIDA LIMITED LIABILITY CO. Granickin LLC

فتكرين وبالكرين والمتاه المنتفية والمراجع والمتاه والمتاه والمتاه والمتاه والمتاه والمتاه والمتاه والمتاه	
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	CTION 605,0902, FLORIDA STATUTI USINESS IN THE STATE OF FLORID		G IS SUBMITTED	TO REGISTER A	FOREIGN LIM	MED (T	ABILITY
1. (Name of For	Greign Limited Liability Company; m	RANICKIN LLC ust include "Limite	I Clability Compa	ny,""L.L.C.," or	"LLC.")		
(If name unavailable, enter of Liability Company," "L.L.C	ilternate name adopted for the purpo ," or "LLC.")	se of transacting bu	siness in Plorida. 1	The alternate gar	e must include	"Limited	1
2 0	olaware	3	81	1-2530718			
(Jurisdiction under the law company is organized)	of which foreign limited liability	***	(FEI numb	per, if applicable)	**************************************		
4.	(Date first transacted busin (See sections 605,0904 & 60;	ess in Florida, if pri	or to registration.)	lity)	•		
E	Granickin				,		
J			·		- E.		
18	5 NW Spanish River Blvd., Suite		, FL 33431		777 (77)	δ.	
	(Street Address of	Principal Office)				<u> </u>	-1-
618	8 NW Spanish River Blvd., Suite	#100, Boca Raton	, FL 33431		745	<	the special field
						$\infty$	Ficusiyen 3
	Mulling	Address)		<del></del>	7-1-1	322	i askasii
	· -					Ī	3 7 7
7. Name and street addres	s of Florida registered agent: (P	O. Box NOT act	eptable)		7 C/	ç	Act and a
Name:	National Corporate Res	earch, Ltd., inc			22	₹ <b>0</b>	
Office Address:	115 North Calhoun S	treet, Suite 4			The second	C.48	
	Tallahass	90	, Florida	32301			
	(City)		, Florida	(Zip oode)			
designated in this applicat to complywith the provision	gistered agent and to accept service, I hereby accept the appoint ons of all statutes relative to the ay position as registered agent.  thought	ment as registere proper and comp	d agent and agra lete performance	ee to act in this	capacity. I fi	urther n	gree
	- (Registe	red agent's signatu	(e)	<del></del>			
8. The name, title or capa	CREGISM FINN / INCL (S ( bity and address of the person(s)	who has/have aut	ACST: SE pority to manage	CY, is/are:			
Kinsan Management Corp.	, Manager of Granickin LLC havi	ng an address at 1	85 NW Spanish I	River Blvd., Sull	# #100,		
And	rew M. Schreler, Vice President						
arisdiction under the law o I the translator must be aul	of existence, no more than 90 day f which it is organized. (If the ce positted) GRANICKIN CE BY: KINSAN MANAGE Signature of	rificate is in a for	cign language, a ار، ح hts. Maı	Ticial having cu translation of the negen V M. SCHREI E PRESIDENT	ne certificate u	ds in the inder oa	e th
his document is executed i	n accordance with section 605.02 the Department of State constitut	103 (1) (b), Florid	a Statutes. I am a	ware that any fa d for in 8.817.15	ilse informatio 5, F.S.	n	
	An	drew M. Schreier					
-	Typed or pr	inted name of signer	;	<del></del>			

(((H160001235123)))

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GRANICKIN 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 MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GRANICKIN LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF APRIL, A.D. 2016.

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

6029337 8300 SR# 20163186931

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

Authentication: 202315955

Date: 05-13-16