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J. HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 163062 8060509

AUTHORIZATION: Sauldeland

COST LIMIT : \$ 125.00

ORDER DATE: June 2, 2016

ORDER TIME : 12:43 PM

ORDER NO. : 163062-005

CUSTOMER NO: 8060509

FOREIGN FILINGS

NAME: 5101 RE CO, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

BJECT: _	101 RE CO, LLC	Name of Limited Liability Company
e enclosed " istence, and	Application by Foreign Limited I check are submitted to register the	Liability Company for Authorization to Transact Business in Florida," Certificate one above referenced foreign limited liability company to transact business in Florid
ease return a	ll correspondence concerning this	s matter to the following:
	Ricardo Caporal	
		Name of Person
		Firm/Company
	1401 Brickell Avenue, Suite	530
		Address
	Miami, FL 33131	
		City/State and Zip Code
	rcaporal@mattonigroup.com	
	E-mail addre	ss: (to be used for future annual report notification)
r further info	ormation concerning this matter, p	please call:
Ricar	rdo Caporal	at (305) 621-9607
-	Name of Person	Area Code Daytime Telephone Number
Divisi Regis P.O. I	LING ADDRESS: ion of Corporations tration Section Box 6327 hassee, Fl. 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

LIM	TED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	, KEGINI EK	A FOR	KEIGI
1.	5101 RE CO, LLC			
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	or "LLC.")		
cons	ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida and atta- tion of the managers or managing members adopting the alternate name. The alternate name must include apany," "L.L.C," "LLC.")			
2. [Delaware 3. 81-2765678			
(J	urisdiction under the law of which foreign limited liability (FEI number, if applicable company is organized))		
4				
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5.	1401 Brickell Avenue, Suite 530	SE		
٠		32.75		LEF
-	Miami, Ft. 33131	<u> </u>	1	1
6. ¹	(Street Address of Principal Office) 401 Brickell Avenue, Suite 530	775 en (11) (11) (12)	AH.	20 - 20 - 20 - 20 - 20 - 20 - 20 - 20 -
-	Miami, FL 33131	108 108 108 108 108 108 108 108 108 108	8: 2	
-	(Mailing Address)	127 F		
7.	The name, title or capacity and address of the person(s) who has/have authority to man	age is/are:		
Ric	ardo Caporal, Member			
140	1 Brickell Avenue, Suite 530			
Mia	mi, FL 33131			
in th	attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official have jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a lation of the certificate under oath of the translator must be submitted.)			nds
	Signature of an authorized person			
	(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation of penalties of perjury that the facts stated herein are true. I am aware that any false information subdocument to the Department of State constitutes a third degree felony as provided for in s.8	mitted in a)	
	Ricardo Caporal Typed or printed name of signee			
	- Jose or humon name or signee			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	of the Limited Liability	Compa	ny is:		
5101 RE CO,	LLC				
If unavailable	e, the alternate to be used	in the	state of Florida is:		
2. The name	and the Florida street ad	dress o	f the registered agent and o	ffice are:	
	Corporation Service Co	ompany			
	And the state of t		(Name)		
	1201 Hays Street				
	Florida Str	eet Addr	ess (P.O. Box NOT ACCEPTABLE	ē)	
	Tallahassee		FL 32301		
			City/State/Zip		
liability comp registered ag statutes relat	pany at the place designate ent and agree to act in thi ing to the proper and com	ed in th is capac plete pe	o accept service of process f is certificate, I hereby accep city. I further agree to comp erformance of my duties, an ered agent as provided for t	pt the appointn ply with the pro nd I am familia	nent as ovisions of all r with and
Siatutes.	Corporation Service Com	npany (Signat	ure)	Courtney Asst. V ⁱ ce	Williams President
	\$	00.00 25.00 30.00	Filing Fee for Application Designation of Registere Certified Copy (optional	d Agent	SECRETA

\$ 5.00 Certificate of Status (optional)

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "5101 RE CO, 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 SECOND DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "5101 RE CO, LLC"

WAS FORMED ON THE TWENTIETH DAY OF MAY, A.D. 2016.

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

Authentication: 202418708

Date: 06-02-16