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16 JUN -7 AM 2: 46,16 JUN -7 AH 10: 31

JUN 0 8 2016 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 167466 \_ 4304335

COST LIMIT : \$\(^1\)25\(^1\)00

ORDER DATE: June 6, 2016

ORDER TIME : 10:23 AM

ORDER NO. : 167466-005

CUSTOMER NO: 4304335

FOREIGN FILINGS

NAME: PEPF SOLARIS KEY TRS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

## **COVER LETTER**

TO:		ration Section n of Corporation	18							
SUBJI		PF SOLARIS KI	EY TRS, LLC							
Name of Limited Liability Company										
The en Exister	iclosed "A nce, and c	pplication by For heck are submitte	eign Limited Liability Comp d to register the above refero	pany for Authoriza enced foreign limi	ation to Tra	nnsact Business in Florida," y company to transact busir	Certifica ness in Fl	ate of orida		
Please	return all	correspondence o	concerning this matter to the	following:						
		LAURIE RUX	TON							
Name of Person										
	KIRKLAND & ELLIS LLP									
Firm/Company										
		300 North LaSalle								
		Address					-			
	Chicago, IL 60654						16 J	SECR		
		City/State and Zip Code					JUN - 7	芸型コ		
1 coppenies of the second seco							SEE			
			E-mail address: (10 be used	d for future annua	l report not	ification)	3			
For fur	ther infor	mation concernin	g this matter, please call:				2: 46	OS TANK		
Robert Roepsch		515 at (	283-55	08	•	*				
		Name o	f Contact Person	Area Code	Day	rtime Telephone Number				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301								
Enclose		eck for the follow 5.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155,00 Fili Certified Copy		☐ \$160.00 Filing Fee, Co of Status & Certified Cop				

## 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 "Limite	ed Liability Company," "L.L.C.," o	or "LLC.")
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose of transacting by	usiness in Florida. The alternate na	ame must include "Limited
2 Delaware			
	of which foreign limited liability	(FEI number, if applicabl	c)
4. May 12, 2016			
	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to dete	rior to registration.) ermine penalty liability)	
5. 711 High Street, Des M	Moines, IA 50392		<del></del>
	(Street Address of Principal Office)		
6			
			F0
	(Mailing Address)		_ <b>6</b> FB
7 Name and street address	s of Florida registered agent: (P.O. Box NOT a	accutable)	E E
7. Name and <u>street audies</u>		cceptable)	1 8 PT
Name:	Corporation Service Company	Warrens Laurens	
Office Address:	1201 Hays Street		<b>2</b> F90
	Tallahassee	. Florida 32301	22 03
	(City)	, Florida(Zip code)	- 5 3년 -
Registered agent's accep			
designated in this applica to complywith the provisi	gistered agent and to accept service of process fition, I hereby accept the appointment as registered ons of all statutes relative to the proper and control position as registered agent.  Corporation Service Company  By:  (Registered agent's signal	red agent and agree to act in the applete performance of my duting	this capacity. I further agree es, and I am familiar with and  Melissa Zender
	<b>,</b>		Asst. Vice President
	acity and address of the person(s) who has/have a		
Avion Lakeside II KEII,	LLC, a Delaware limited liability company, men	nber	
711 High Street, Des Moi	nes, IA 50392		
	of existence, no more than 90 days old, duly author which it is organized. (If the certificate is in a abmitted)  X  Signature of an authorized	foreign language, a translation	
	Signature of an authorized	person	<del>-</del>
	I in accordance with section 605.0203 (1) (b), Floothe Department of State constitutes a third degree	orida Statutes. I am aware that a	
	Robert G. Roepsch		

Typed or printed name of signee

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PEPF SOLARIS KEY TRS, 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 SIXTH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PEPF SOLARIS KEY"
TRS, LLC" WAS FORMED ON THE ELEVENTH DAY OF MAY, A.D. 2016.

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

SEGRETARY OF STATE TALL ANASSEE, FLORIDA

Authentication: 202439387

Date: 06-06-16

6039624 8300 SR# 20164318388