MI600005130					
(Requestor's Name) (Address) (Address)	700286939617				
(City/State/Zip/Phone #)					
(Business Entity Name) (Document Number)	06/24/1601015009 ★★155.00				
Certificates of Status	16 JU SECRET TALLAN				
	FILED JUN 24 PH 3 12 MINSSE, FLORIDA				
Office Use Only					

FERRANTE & ASSOCIATES

ATTORNEYS AT LAW

126 Prospect Street - Cambridge, Massachusetts 02139 Telephone 617-868-5000 Fax 617-868-2519

June 21, 2016

Florida Department of State Division of Corporations - Registration Section Clifton Building - 2661 Executive Center Circle Tallahassee, FL 32301

Re: Qualification of the Foreign Corporation LIV unLtd LLC

Dear Sir/Madam:

In connection with the Application by Foreign Limited Liability Company for Authorization to transact business in Florida for LIV unLtd LLC, enclosed you will find the following documents:

- Application by Foreign Limited Liability Company for Authorization to transact business in Florida form;
- Certificate of Good Standing from the State of Delaware;
- check payable to the Florida Department of State in the amount of \$155.00 (including filing Fee and Certified Copy fee).

If you have any questions or require additional information, please feel free to contact me directly Thank you for your assistance in this matter.

Very truly yours,

-

.....

دي

 \Box

1-

Santino Ferrante

Enclosures

COVER LETTER

_

•

TO: ' Registration Section Division of Corporations

, ~~a

.

SUBJECT:			LIV unLtd LLC		•	•		
		Name of	Limited Liability	Company				
The enclosed "A Existence, and cl	pplication by For heck are submitte	eign Limited Liability Com d to register the above refer	pany for Authorize enced foreign limi	ation to Tri ited liabilit	ansact Business in Flor y company to transact	rida," Ce business	rtifica in Flo	te of orida
Please return all	correspondence of	oncerning this matter to the	following:					
	Santino Ferrant	e				•		
		N	ame of Person					
	Ferrante & Ass	ociates						
		F	irm/Company		· · · · · · · · · · · · · · · · · · ·			
	126 Prospect S	:						
			Address					
	Cambridge, MA	A 02139				ALLA MILA	ۍ ۲	
		City/S	tate and Zip Code	;		22	JUN 2	
:	sf@ferranteandas	sociates.com					t-	Π
-	<u> </u>	E-mail address: (to be use	d for future annual	l report not	ification)		PH	Ο
For further information concerning this matter, please call:							ي: 21	
	Sant	ino Ferrante	617 at (868-50	00	۲	-	
	Name o	f Contact Person	Area Code	_/	time Telephone Numb	ber		
Division Registra P.O. Bo	NG ADDRESS: a of Corporations tion Section x 6327 ssee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	•		
Enclosed is a che	ck for the followi .00 Filing Fee	ng amount: \$130.00 Filing Fee & Certificate of Status	X \$155.00 Filir Certified Copy	ng Fee &	□ \$160.00 Filing Fe of Status & Certified		icate	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITT SECTION 605,0002, FLORIDA STATUTES: THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIV-unLtd LLC

(Name of Foreign Eimited Liability Company; must include:"Limited Liability Company," "L.L.C." or "LLC.")

Delaware		3.	47-2885746		, ,			
(Jurisdiction under the law company is organized).	of which foreign limited liability			(FEI number, if	applicable)			
06/15/2016								
· · · · · · · · · · · · · · · · · · ·	(Date first transacted busine (See sections 605.0904 & 605							
662 Third Avenue, 14	th Floor				, , , , ,			
New York, NY, 10017								
	(Street Address of	Principa	(Office)					
662 Third Avenue, 14t	h Floor	1 me/	· · · ·					
New York, NY, 10017	,							
• <u>↓ =•• =</u> ••	(Mailing	Address)			ALI	5	
. Name and street addres	as of Florida registered agent: (P	.O. Box	<u>NOT</u> acceptabl	e)		上書	JUN	
Name:	Corporation Service Company						\sim	
Office Address:	1201 Hays Street						£-	, T
	Tallahassee			Florida 32301		- For	ခြ မွ	Ċ.
	(City)				p code)	<u> </u>	77	

designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Holly Jones Assistant Vice President (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 662 Third Avenue, 14th Floor, New York, NY, 10017 Wendy Bosalavage President:

Mitchell/B. Friedlander	Chief Executive Officer	662 Third Avenue, 14th Floor, New York, NY, 10017
Beth Caplan	Secretary and Treasurer	662 Third Avenue. 14th Floor, New York, NY, 10017

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a loreign language, a translation of the certificate under onth of the translator must be submitted)

Signature of an authorized person

Signature of an automized person

This document is executed in accordance with section 605.0£03 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Mitchell B. Friedlander

Typed or printed name of signee



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIV UNLTD 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 TWENTY-FOURTH DAY OF MAY, A.D. 2016.

5 42 111 \bigcirc ယု $\overline{\sim}$

Page 1



. Secretary of State

Authentication: 202375147

Date: 05-24-16

5683038 8300

SR# 20163598230 You may verify this certificate online at corp.delaware.gov/authver.shtml