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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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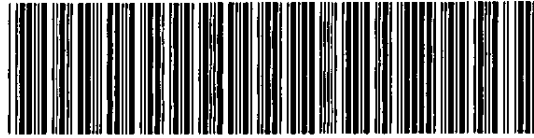
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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K. SALY
EXAMINER

AUG 4

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 242529 5174517
AUTHORIZATION : 
COST LIMIT : \$ 125.00

ORDER DATE : August 3, 2016
ORDER TIME : 3:34 PM
ORDER NO. : 242529-005
CUSTOMER NO: 5174517

FOREIGN FILINGS

NAME: L3 MANAGEMENT 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: Melissa Zender -- EXT# 62956

EXAMINER: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: L3 Management LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

David Salmanson

Name of Person

Salmanson Capital, LLC

Firm/Company

360 Madison Avenue, Suite 1902

Address

New York, New York 10017

City/State and Zip Code

david@salmansoncapital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Salmanson

212
at ()

213-1270

Name of Contact Person

Area Code

Daytime 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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**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:

1. L3 Management LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. New York 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEL number, if applicable)

4. August 1, 2016
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 360 Madison Avenue, Suite 1902
New York, New York 10017
(Street Address of Principal Office)

6. 360 Madison Avenue, Suite 1902
New York, New York 10017
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place 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.

By: Corporation Service Company

By:

(Registered agent's signature)

M. Zender
Melissa Zender
Asst. Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

David E. Salmanson, Sole Member

360 Madison Avenue, Suite 1902

New York, New York 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 foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (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.

David Salmanson, as Sole Member

Typed or printed name of signee

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2016 AUG -3 AM 9:15
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TALLAHASSEE, FLORIDA

State of New York Department of State } ss:

I hereby certify, that UNIVERSITY CAPITAL MANAGEMENT, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/12/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment UNIVERSITY CAPITAL MANAGEMENT, LLC, changing its name to CAMPUS HILL, LLC, was filed 11/17/2011.

A Certificate of Amendment CAMPUS HILL, LLC, changing its name to L3 MANAGEMENT LLC, was filed 08/11/2015.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 02nd day of August
two thousand and sixteen.*

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State

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TALLAHASSEE, FLORIDA