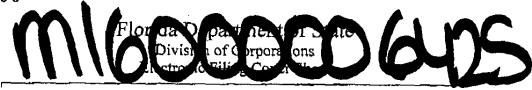
Division of Corporations

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

IN COMPLIANCE WITH SECTION 605 0502, FLORIDA. STATUTES, THE FOLLOPING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LUBILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA: Blue Lagoon Florida 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 he Planda. The alternate name must include "Limited Liability Company." "L.L.C." or "LLC.") Delaware (Turisdiction under the law of which foreign limited Hability company is organized) (FEI number, if applicable) 08/05/2016 (Date first transacted business in Blorida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 743 Crandon Blvd., Apr. 306 Koy Biscayne, FL 33149 (Street Address of Principal Office) 743 Crandon Blvd., Apt. 306 Key Biscoyne, PL 33149 (Mailing Addross) 7. Name and afrect address of Florida registered agent: (P.O. Box NOT acceptable) NRAI Services, Inc. Name: 1200 South Pine Island Road. Office Address: Plantation (City) Registered agent's neceptance: 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 complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and uccept the obligations of my position as registered agent. 8. The mame, title or capacity and address of the person(s) who has/have authority to manage is/are: Lourdes Doria Modina, Manager 743 Crandon Blvd., Apt, 306 Key Biscayne, FL 33149 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 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 autimited in a document to the Department of State constitutes a third degree fellows as provided for in s.817.135, P.S.

Typed or printed name of signee

William Shahoon, Esq.

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Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BLUE LAGOON FLORIDA 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 FOURTH DAY OF AUGUST, A.D. 2016.

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

SECRETARY OF STATE

6109428 8300 SR# 20165224181

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

Authentication: 202774073

Date: 08-04-16