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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 15, 2016

CHAD BELTER PO BOX 3948 IRMO, SC 29063

SUBJECT: CMBS LLC

Ref. Number: W16000056573



We have received your document for CMBS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 416A00017224

9/16/16

Attached is the form that Delaware sent us. This is the original we received. Thankyou,

www.sunbiz.org

COVER LETTER

	ation Section n of Corporation	ns		
SUBJECT:		CMBS	LCC	
	· · ·		Limited Liability Company	
				insact Business in Florida," Certificate of y company to transact business in Florida
Please return all	correspondence	concerning this matter to the	following:	
	Cho	ad Belto, r	nember / L ame of Person	isa Gilstrap, Acctin
		<u>CMBS</u>	LLC irm/Company	
		PO Box	3948 Address	
			C 29063	
	•	-	tate and Zip Code	
	ac	COUNTING © E-mail address: (to be used	P95 DLM US	ement.com
For further infor	mation concernin	g this matter, please call:		
1	Name (ilstrap of Contact Person	at (803) 59 Area Code Day	53-1910 rtime Telephone Number
Divisio Registra P.O. Bo	n of Corporations ation Section ox 6327 ssee, FL 32314		Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301
Enclosed is a che ☐ \$125	eck for the follow 5.00 Filing Fee	ring amount: ☐ \$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. (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. Delaware (Jurisdiction under the law of which foreign limited liability) 3. 81-1725409 (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
701 N. Moody Rd, Unit 10-1 Palatka FL 32177 (Street Address of Principal Office)
6
POBOX 3948 Irmo SC 29063 (Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: DJ Rizos
Office Address: 701 N. Moody Rd, Unit 10-1
Palatka . , Florida 32177 (City) (Zip code)
(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 complywith 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.
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Chad Belter, Member 7821 St Andrews Rd, Unit 3948, Irmo SC Lisa Gilstrap, Accounting, 7821 St Andrews Rd Unit 3948 Irmo SC 29063
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
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
Chad Belter Typed or printed name of signce



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

DELAWARE, DO HEREBY CERTIFY THAT "CMBS, LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, CHANGING ITS NAME FROM "CMBS LLC" TO
"CMBS, LLC", FILED THE FIRST DAY OF MARCH, A.D. 2016, AT 5:53
O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

Authentication: 202956937

Date: 09-08-16