M16000007872

| (Requestor's Name) | | | | | |
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| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies Certificates of Status | | | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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OCT 0 1 2016 Y SULKER CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 289273 4331207

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: September 13, 2016

ORDER TIME : 2:32 PM

ORDER NO. : 289273-030

CUSTOMER NO: 4331207

FOREIGN FILINGS

NAME: MELVILLE II, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

COVER LETTER

· TO:

| то: | Registration Section Division of Corporations | | | | | |
|-------------------------|--|--|--|--|--|--|
| SUBJI | Melville II, LLC | | | | | |
| 5000 | Name of Limited Liability Company | | | | | |
| The en | closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida | | | | | |
| Please | eturn all correspondence concerning this matter to the following: | | | | | |
| | Kelly E. Guerin, Esq. | | | | | |
| | Name of Person | | | | | |
| | Kavinoky Cook LLP | | | | | |
| Pirm/Company | | | | | | |
| | 726 Exchange Street, Suite 800 | | | | | |
| Address | | | | | | |
| | Buffalo, New York 14210 | | | | | |
| City/State and Zip Code | | | | | | |
| | mcarsten@gardensalive.com | | | | | |
| | E-mail address: (to be used for future annual report notification) | | | | | |
| For fu | her information concerning this matter, please call: | | | | | |
| | Kelly E. Guerin, Esq. 716 845-6000 | | | | | |
| | Name of Contact Person Area Code Daytime Telephone Number | | | | | |
| | MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301 | | | | | |
| Enclos | d is a check for the following amount: \$\Bigsize \text{\$\substack{125.00 Filing Fee}\$} \Bigsize \text{\$\substack{130.00 Filing Fee} & Bigsize \text{\$\substack{155.00 Filing Fee}\$} \Bigsize \text{\$\substack{155.00 Filing Fee}\$} \Bigsize \text{\$\substack{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. Melville II, LLC | | | |
|---|--|---|--------------------------------|
| (Name of Fore | eign Limited Liability Company; must include "L | imited Liability Company," "L.L.C.," | or "LLC.") |
| N/A | | | · |
| Liability Company," "L.L.C, | · · · · · · · · · · · · · · · · · · · | | name must include "Limited |
| 2. Delaware | 3. 81- | 3839805 | |
| company is organized) | of which foreign limited liability | (FEI number, if applicab | ile) |
| Upon qualification | D. C. dan and L. C. and C. C. | (6 | |
| | (Date first transacted business in Florida (See sections 605.0904 & 605.0905, F,S. to | o determine penalty liability) | |
| 3. 230 Mary Avenue, Gre | endale, Indiana 47025 | | <u> </u> |
| | (Street Address of Principal Off | lice) | |
| 5. 230 Mary Avenue, Gre | | | |
| | | | |
| | (Mailing Address) | - | _ 6 5 |
| | | | |
| Name and street addres | ss of Florida registered agent: (P.O. Box <u>No</u> | <u>OT</u> acceptable) | |
| Name: | Corporation Service Company | | デー の |
| Office Address: | 1201 Hays Street | ······································ | © |
| | Tallahassee | , Florida 32301 | |
| | (City) | (Zip code) | _ |
| lesignated in this applicate complywith the provision | gistered agent and to accept service of proction, I hereby accept the appointment as refons of all statutes relative to the proper and my position as registered agent. Corporation Service Company By: (Registered agent's | gistered agent and agree to act in I complete performance of my dut | this capacity. I further agree |
| 8. The name, title or capa | acity and address of the person(s) who has/ha | ave authority to manage is/are: | |
| K. Niles Kinerk, Manager | r, 230 Mary Avenue, Greendale, Indiana 470 |)25 | |
| Fric Hamant Manager 2 | 30 Mary Avenue, Greendale, Indiana 47025 | | |
| Die Hallan, Hallager, 2. | , vialy Avenue, dicendate, include 47025 | <u> </u> | |
| | of existence, no more than 90 days old, duly of which it is organized. (If the certificate is ubmitted) | in a foreign language, a translation | |
| | Signature of an author | rized person | |
| This document is executed abmitted in a document to | I in accordance with section 605.0203 (1) (b) the Department of State constitutes a third of |), Florida Statutes. I am aware that degree felony as provided for in s.8 | any false information |
| | Eric Hamant, CEO, President, Manager | - , | • |

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MELVILLE II, 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 TWENTIETH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MELVILLE II, LLC" WAS FORMED ON THE THIRTEENTH DAY OF SEPTEMBER, A.D. 2016.

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

6150433 8300 SR# 20165859654 Authentication: 203023077

Date: 09-20-16