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Division of Corporations

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Florida Department of State
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To:

Division of Corporations
Fax Number : 950-687-6363

From:

Account Name : LOWMEY, DRS., LLC, ROOPER, KANTOR & REED, P.A.
Account Number : 072720003036
Phone : (407)142-1610
Fax Number : (407)843-4444

Enter the email address for the filer on the filing page for future email report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company
BARDMOOR PALMS HOLDCO, LLC

Certificate of Status	0
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DEC 15 2016

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THIS DOCUMENT IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. BARDMOOR PALMS HOLDCO, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLP")

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

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. N/A

(Tax number, if applicable)

4. UPON FILING OF THIS APPLICATION

(Date first transacted business in Florida; must be prior to registration)
(See sections 605.0901 and 605.0902, Florida Statutes, for filing requirements.)

5. 5550 WEST EXECUTIVE DRIVE, SUITE 550

TAMPA, FLORIDA 33607

6. 5550 WEST EXECUTIVE DRIVE, SUITE 550

TAMPA, FLORIDA 33607

(Mailing Address)

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

Name: GARY W. HARROD

Office Address: 5550 WEST EXECUTIVE DRIVE, SUITE 550

TAMPA

33607

(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.

(Registered agent's signature)

8. The name, title or capacity and address of the person who has have authority to make agent is/are:

BARDMOOR PALMS HOLDING COMPANY, LLC, MEMBER

5550 WEST EXECUTIVE DRIVE, SUITE 550

TAMPA, FLORIDA 33607

9. Attached is a certificate of existence, not more than 90 days old, from the jurisdiction in which the company is organized and having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is not in English, attach a translation of the certificate under oath or the translation must be submitted.)

(Signature of person)

This document is submitted to the Department of Banking and Finance, State of Florida, and I am aware that any false information submitted in a document to the Department of Banking and Finance is a third degree felony as provided for in s.817.155, F.S.

GARY W. HARROD

(Print name of signer)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Delaware

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I, JEFFREY W. BUDICK, SECRETARY OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "PROXIMA, 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 SECOND DAY OF DECEMBER, A.D. 2016.

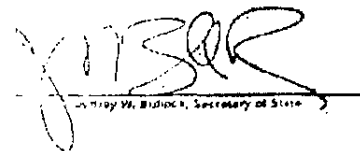
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



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SR# 20160892373

You may verify this certification at corp.delaware.gov


Jeffrey W. Budick, Secretary of State

Authentication: 203439854

Date: 12-02-16