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K. SALY JAN - 6 2017 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT N	NO.	:	I20000000195
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REFERENCE: 446872 7532900

AUTHORIZATION : Smell ble rea

COST LIMIT : (\$'125.00

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ORDER DATE: January 4, 2017

ORDER TIME : 3:22 PM

ORDER NO. : 446872-010

CUSTOMER NO: 7532900

## FOREIGN FILINGS

NAME: SN 1237, 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:

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

IN COMPLIANCE WITH SECTION 603.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Emitted Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")				
ame unavailable, enter alte ility Company," "L.L.C."	ernate name adopted for the purpose of transacting be	usiness in Florida. The alternate name mus	st include "Lin	
Claware	- <del></del>			
urisdiction under the law o	f which foreign limited liability	(FEI number, if applicable)		
company is organized)		(*		
	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to dete	rior to registration.) ermine penalty liability)		
2808 NE 1st Avenue				
Wilton Manors, FL 333	34		72	
** Inch issueds, 112 333.	(Street Address of Principal Office)		F :	
2808 NE 1st Avenue	(order response of the state of		至	
<del></del>			TALLAHASS	
Wilton Manors, FL 333	±		70	
	(Mailing Address)		77.5	
Name and street address	s of Florida registered agent: (P.O. Box NOT:	scceptable)	95	
Name:	RA Feingold Law & Consulting, P.A.	<del> </del>	===	
Office Address:	401 E. Las Olas Boulevard, Suite 1400			
	Ft. Lauderdale	Florida 33301		
	(City)	(Zip code)		
egistered agent's accept aving been named as re	tance:	for the above stated limited liability	company at t	
aving been named as re- signated in this applica- complywith the provision	· •	mplets performance of my duties, an		
aving been named as resignated in this application of the complywith the provision of the obligations of the control of the co	tance: egistered agent and to accept service of process don, I hereby accept the appointment as regist ons of all statutes relative to the proper and co my position as registered agent.  (Rogintered agent's sig	mplets performance of my duties, an		
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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SN 1237, LLC" IS DULY FORMED UNDER THE

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

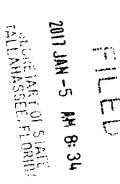
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE FOURTH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SN 1237, LLC"

WAS FORMED ON THE FOURTH DAY OF JANUARY, A.D. 2017.

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





Authentication: 201817641

Date: 01-04-17

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