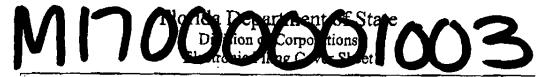
2/2/2017

Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: VCORP SERVICES, LLC Account Name

Account Number ; 120080000067 Phone : (845)425-9077 Fax Number : (845)818-3588

**Enter the email address for this business entity to be used for future

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Foreign Limited Liability Company Ameritel of Blanding Park, LLC

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

IN COMPLIANCE WITH SECTION 603.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Amerital of Blanding Park, 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 in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") DE (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Plorida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 250 47th Street, Brooklyn, NY 11220 (Street Address of Principal Office) 250 47th Street, Brooklyn, NY 11220 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Vcorp Services, LLC Name: 5011 South State Road 7, Suite 106 Office Address: Florida_33314 Davie Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Michael Ziegler, Member, 250 47th Street, Brooklyn, NY 11220 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, Is the certificate is in a ferbigo language, a translation of the certificate under outh 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. Michael Ziegler, Member

Typed or printed name of signee

<u>Delaware</u>

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The First State

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

DELAWARE, DO HEREBY CERTIFY "AMERITEL OF BLANDING PARK, 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 FIFTH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMERITEL OF BLANDING PARK, 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: 201823648

Date: 01-05-17