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| PICK-UP | ☐ WAIT | MAIL | | |
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| Certified Copies | _ Certificate | s of Status | | |
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| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

| ACCOUNT NO. : I2000000195 | | | | | | |
|---------------------------------------------------------------------|--|--|--|--|--|--|
| REFERENCE : 499205 4983A | | | | | | |
| AUTHORIZATION: Symulocle man | | | | | | |
| COST LIMIT : \$ 125.00 | | | | | | |
| ORDER DATE : February 6, 2017 | | | | | | |
| DRDER TIME : 12:26 PM | | | | | | |
| ORDER NO. : 499205-005 | | | | | | |
| CUSTOMER NO: 4983A | | | | | | |
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| FOREIGN FILINGS | | | | | | |
| NAME: HWY 50 TITUSVILLE LLC | | | | | | |
| XXXX QUALIFICATION (TYPE: <u>LL</u>) | | | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | | | |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | | | | | |

EXAMINER:

CONTACT PERSON: Courtney Williams -- EXT# 62935

COVER LETTER

| TO: | Registration Section Division of Corporations |
|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJI | HWY 50 TITUSVILLE LLC |
| | Name of Limited Liability Company |
| | closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ace, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida |
| Please | return all correspondence concerning this matter to the following: |
| | Eric Gordon |
| | Name of Person |
| | Frontier Development |
| | Firm/Company |
| | 1801 SW 3rd Avenue, Suite 500 |
| | Address |
| | Miami, FL 33129 |
| | City/State and Zip Code |
| | egordon@fdllc.com |
| | E-mail address: (to be used for future annual report notification) |
| For fu | ther information concerning this matter, please call: |
| | Harry A. Reichner, Paralegal, Cozen O'Connor at (215) 665-4746 |
| | Name of Contact Person Area Code Daytime Telephone Number |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclo | osed is a check for the following amount: \$\Bigcup \\$125.00 \text{ Filing Fee} \Bigcup \\$130.00 \text{ Filing Fee} \& \Bigcup \\$155.00 \text{ Filing Fee} \& \Bigcup \\$160.00 \text{ Filing Fee, Certificate} \\ \$\Certificate \text{ Ocertificate Copy} \text{ 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. HWY 50 TITUSVILLE 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 Liability Company," "L.L.C," or "LLC.") | t inclu | de "Limitec | d |
| 2. Delaware 3 3 | | بعسد | |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | 15.4 | FER | -13 |
| 4 | | رن ۱ | 3.000 |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) | .* | | 1 |
| 5. c/o Frontier Development, 1801 SW 3rd Avenue, Suite 500 | | | , grand |
| Miami, FL 33129 | | , G | |
| (Street Address of Principal Office) | | | |
| 6. c/o Frontier Development, 1801 SW 3rd Avenue, Suite 500 | | | |
| Miami, FL 33129 | | _ | |
| (Mailing Address) | | | |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage | is/ar | e: | |
| Eric Gordon, Manager | | | |
| c/o Frontier Development, 1801 SW 3rd Avenue, Suite 500 | | | |
| Miami, FL 33129 | | | |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated having custody of records in the jurisdiction under the law of which it is organized. (A photoc acceptable. If the certificate is in a foreign language, a translation of the certificate under oath must be submitted) | ору і | s not | |
| | | | |
| Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in | | | are lrue |
| Eric Gordon, Manager | | | |
| Typed or printed name of signee | | | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name | of the Limited Liability Company is: JSVILLE LLC | |
|------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| If unavailabl | e, the alternate to be used in the state of Floric | da is: |
| 2. The name | e and the Florida street address of the registere | 歩 d 対 |
| | Corporation Service Company | or di |
| | (Name) | |
| | 1201 Hays Street | ्र - (|
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| | Tallahassee FL | 2301 |
| | City/State/Z | Cip |
| liability com registered a statutes rela | n named as registered agent and to accept serve pany at the place designated in this certificate, gent and agree to act in this capacity. I further ting to the proper and complete performance of bligations of my position as registered agent a | , I hereby accept the appointment as r agree to comply with the provisions of all of my duties, and I am familiar with and |
| | Corporation Service Company | Gourney Williams |
| | Ву: | Asst. 1 - 5 President |
| | (Signature) | |
| | \$ 25.00 Designation | for Application on of Registered Agent Copy (optional) |

\$ 5.00 Certificate of Status (optional)

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HWY 50 TITUSVILLE 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 SIXTH DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HWY 50 TITUSVILLE LLC" WAS FORMED ON THE THIRD DAY OF FEBRUARY, A.D. 2017.

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

Authentication: 201987420

Date: 02-06-17

6304578 8300 SR# 20170666825