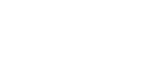
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## LaSalle Legal Services, PLLC

February 1, 2017

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

RE: Tapestry Tallahassee Walden, LLC

To Whom It May Concern:

Please find enclosed the following:

- 1. The Cover Letter and Application by Foreign Limited Liability Company for Authorization to Transact Business in the State of Florida for Tapestry Tallahassee Walden, LLC, a Delaware limited liability company;
- 2. A Certificate of Good Standing from the Delaware Secretary of State for Tapestry Tallahassee Walden, LLC;
- 3. A Registered Agent Consent Form from Paracorp Inc.;
- 4. A check in the amount of \$160.00 made out to the Florida Department of State.

Please contact me with any questions or comments regarding this application. Thank you for your professionalism regarding this matter.

Sincerely

Brent LaSalle Attorney at Law

-- 651 662 2662

### COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	Tapestry Tallahasse	e Walden, LLC				
Sobject.		Name of Limited Liability Company				
		eign Limited Liability Comp d to register the above refere				
Please return	all correspondence c	oncerning this matter to the	following:			
	Brent LaSalle					
	Name of Person					
	LaSalle Legal Services, PLLC					
	Firm/Company					
	2001 Killebrew Drive, Suite 100					
	Address				· 54.00	
	Bloomington, MN 55425				TEB TEB	
City/State and Zip Code						
	blasalle@lawlasalle.com					
	<del>· · · · · · · · · · · · · · · · · · · </del>	E-mail address: (to be used	for future annual	report not	ification)	. <b>II</b> 0
For further in	nformation concernin	g this matter, please call:				PH 4: 32
Brent LaSalle 651 442-3462			62	,		
	Name o	f Contact Person	Area Code	Day	time 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				
	a check for the follow		□ ¢155 00 mm	P 9	ET CLASSES E	·4°6°4
П.	\$125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ig ree &	□ \$160.00 Filing Fee, C of Status & Certified Co	

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

IN FLORIDA IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Tapestry Tallahassee Walden, 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.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2001 Killebrew Drive, Suite 100 Bloomington, MN 55105 (Street Address of Principal Office) 2001 Killebrew Drive, Suite 100 Bloomington, MN 55105 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Paracorp Inc. Name: 155 Office Plaza Drive, First Floor Office Address: , Florida 32301 Tallahassee (City) 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 complywith 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(s) who has/have authority to manage is/are: Thomas W. LaSalle Chief Executive Officer, Richard Bienapfl, Chief Operating Officer 2001 Killebrew Drive, Suite 100 Bloomington, MN 55425 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. (If the certificate is in a foreign language, a translation of the certificate under oath 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.

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE: 02/03/2017

ENTITY NAME: Tapestry Tallahassee Walden, LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Sharon Cooke, Assistant Secretary

Paracorp Incorporated

Sharon Coose

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TAPESTRY TALLAHASSEE WALDEN, 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 THIRD DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TAPESTRY TALLAHASSEE WALDEN, LLC" WAS FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2016.

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

17 FFR -6 PH 4: 32

Som delaware gov/aut

Authentication: 201982451

Date: 02-03-17

6187590 8300 SR# 20170644124