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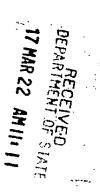
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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2017 HAR 22 AH 8: 01
SUCHE ASSEC, FLORING



K. SALY Mar 23 2017 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 505551 7895381

AUTHORIZATION

COST LIMIT : (\$\125.00

ORDER DATE: February 9, 2017

ORDER TIME : 9:52 AM

ORDER NO. : 505551-010

CUSTOMER NO: 7895381

FOREIGN FILINGS

NAME: BISNOW, 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#

EXAMINER:

COVER LETTER

TO:		ion Section of Corporation	ıs						
SUBJE		ow LLC							
		Name of Limited Liability Company							
The end Existen	closed "App nce, and che	lication by For	eign Limited Liability Comp d to register the above refer	pany for Authoriz enced foreign lim	ation to Tra ited liabilit	ansact Business in Florida," y company to transact busin	Certificate of less in Florida		
Please	return all co	rrespondence c	oncerning this matter to the	following:					
	1	Devin Crone							
	-	Name of Person							
	1	Bisnow Media Corp							
	-	Firm/Company							
	•	718 7th Street NW 2nd Floor							
	_	Address							
	,	Washington, DC 20001							
	City/State and Zip Code								
	devin.crone@bisnow.com								
			E-mail address: (to be use	d for future annua	l report not	tification)			
For fur	ther informa	tion concerning	this matter, please call:						
	Devin Cr	one		202 at (450 14				
		Name o	Contact Person	Area Code	Day	time Telephone Number			
	Division of Registration P.O. Box				Division Registrat Clifton B 2661 Exe	of Corporations ion Section suilding centive Center Circle see, FL 32301			
Enclose		for the following Fee	ng amount: □ \$130.00 Filing Fec & Certificate of Status	☐ \$155.00 Fili Certified Copy		☐ \$160.00 Filing Fee, Co of Status & Certified Cop			

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

IN COMPILANCE 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 Bisnow LLC						
(Name of Fore	agn Limited Liability Company; must inc	lude "Limited Liability Company." "L.L.C.,	" or "LLC.")			
(If name unavailable, enter al	ternate name adopted for the purpose of ti	ransacting business in Florida. The alternate	name must include "Limited			
Liability Company," "L.L.C,	or "LLC.")	, and the second				
DISTRICT OF COLUM	IBIA 3	3				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applica	able)			
4	(Date first transacted business in	Florida if not to registration				
	(See sections 605.0904 & 605.0905	i, F.S. to determine penalty liability)				
5. 718 7th Street, NW 2n	d floor					
WASHINGTON DC 2	WASHINGTON DC 20001					
	(Street Address of Princi	ipal Office)	2 7			
6. 718 7th Street, NW 2nd	floor					
WASHINGTON DC 2	0001		2011 tan 22 tan 8:01			
	(Mailing Addre	css)				
7 Name and street address	s of Florida registered agent: (P.O. B	Pox NOT acceptable)				
	Corporation Service Company	1101 accopancy				
Name:						
Office Address:	1201 Hays Street					
	Tallahassee	Florida 32301				
	(City)	(Zip code)			
Registered agent's accep		of process for the above stated limited (liability company at the place			
designated in this applica	tion, I hereby accept the appointmen	at as registered agent and agree to act i	n this capacity. I further agree			
to complywith the provision	ons of all statutes relative to the prop	per and complete performance of my di	uties, and I am familiar with and			
accept the obligations by t	ny position as reginered agent Corporation Service Company		lydia C-I			
	Ву:		Lydia Cohen Asst. Vice President			
	(Registerea	agent's signature)	Fresident			
8. The name, title or capa	acity and address of the person(s) who	has/have authority to manage is/are:				
William Friend 7. M	ember 718 7th Street, NW 2nd floor	r, Washigton DC 20001				
Michael Vigario M	ember 718 7th Street, NW 2nd floo	or , Washigton DC 20001				
Devin Crone Me	ember 718 7th Street, NW 2nd floor	r , Washigton DC 20001				
O Attached in a comificate	of aviatures, we make the OO days of	Id duly outhousiseted by the official but	ing augtody of vapords in the			
		ld, duly authenticated by the official havicate is in a foreign language, a translation				
of the translator must be s	uhmitted)					
	<i>J</i>	Der Cox				
	Signature of an	n authorized person				
		(1) (b), Florida Statutes. I am aware that third degree felony as provided for in s				
	Devin C	Crone				
	Typed or printe	ed name of signee				

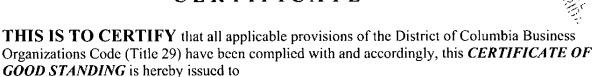
TO THE SECOND

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS CORPORATIONS DIVISION



CERTIFICATE



BISNOW, LLC

WE FURTHER CERTIFY that the domestic filing entity is formed under the law of the District on 4/23/2009; that all fees, and penalties owed to the District for entity filings collected through the Mayor have been paid and Payment is reflected in the records of the Mayor; The entity's most recent biennial report required by § 29-102.11 has been delivered for filing to the Mayor; and the entity has not been dissolved. This office does not have any information about the entity's business practices and financial standing and this certificate shall not be construed as the entity's endorsement.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 3/21/2017 11:27 AM

Business and Professional Licensing Administration

CONTRACTOR OF CO

PATRICIA E. GRAYS Superintendent of Corporations Corporations Division

Muriel Bowser Mayor

Tracking #: pF5QCvhR