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n BRUCE APR 11 2017 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 591232 7998486

AUTHORIZATION: Spelle Man

COST LIMIT : \$ 125.00

ORDER DATE: April 10, 2017

ORDER TIME: 12:57 PM

ORDER NO. : 591232-015

CUSTOMER NO: 7998486

FOREIGN FILINGS

NAME: IP NUVO JACKSONVILLE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

J APR 10 A T

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: IP Nuvo Jacksonville, 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,") 2. Delaware 3 Applied For (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability 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) 288 North Park Avenue, Winter Park, FL 32789 (Street Address of Principal Office) 288 North Park Avenue, Winter Park, FL 32789 (Mailing Address) 7. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) Misha Cardamone Name: 288 North Park Avenue Office Address: Winter Park 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/arc: Gary Cardamone, President 288 North Park Avenue, Winter Park, Florida 32789 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. (JEthe certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Silvibilitie 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. Gary Cardamone, President

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "IP NUVO JACKSONVILLE, 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 TENTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IP NUVO

JACKSONVILLE, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF FEBRUARY,

A.D. 2017.

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

Authentication: 202350688

Date: 04-10-17

6319207 8300 SR# 20172383576