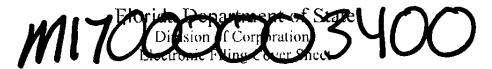
4/17/2017

Division of Corporations



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Help

D. SCOTT

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

| | ner LLC | | | |
|---|--|--|--|---|
| (Name of For | eign Limited Liability Company; must | t include "Limited Li | ability Company." L L.C.," or | "LLC.") |
| (If name unavailable, enter a Liability Company," "L.L.C. | Itemate name adopted for the purpose "or "ELC.") | of transacting busine | ess in Florida. The alternate nar | ne must include "Limited |
| 2. Delaware | | 3. 82-0986163 | | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | | (FEI number, if applicable | |
| 4. <u>N/A</u> | (Date first transacted busines | s in Florida, if prior t | to registration.) | |
| | (See sections 605.0904 & 605.0 | 0905, F.S. to determin | ne penulty liability) | |
| 5. 1621 18th Street, Suit | e 250, Denver, CO 80202 | | | |
| 1621 18th Street Suite | (Street Address of P | rincipal Öffice) | سست سندن و سندر د دوم و سنگنگ د درسور می در دربار برد دربار در دربار دربار دربار دربار بر | |
| 6 | 250, Denver, CO 80202 | | | |
| | | | | ** |
| | (Muling A | (ddress) | | |
| Name and street addre | 55 of Florida registered agent: (P.C | O. Box <u>NOT</u> accep | stable) | |
| Name: | NRAI Services, Inc. | | _ | E SE |
| Office Address: | 1200 South Pinc Island Road | | · . | |
| | Plantation | | , Florida | |
| | (City) | 150 | 477 | _ ,,,,,,, |
| Registered agent's accep | | | (Zip code) | THO T |
| designated in this applica to complywith the provisi | otance: egistered agent and to accept servi ulon, I hereby accept the appoints ions of all statutes relative to the p my position as registered agent. NRAS Services, Inc By: | ment as registered in some and completed in the second | agent and agree to act in the te performance of my dutie: Denise Bell, A | is captacty I further ago s, and fam familiar with |
| Having been named as ro designated in this applica to complywith the provisi accept the obligations of | otance: egistered agent and to accept servi ulon, I hereby accept the appoints ions of all statutes relative to the p my position as registered agent. NRAS Services, Inc By: | ment as registered of oper and completed by Bluer and completed by Bluer and | agent and agree to act in the te performance of my dutie: Denise Bell, A. | is captacty I further ago s, and fam familiar with |
| Having been named as re designated in this applica- to complywith the provisi- accept the obligations of 8. The name, title or cap | otance: egistered agent and to accept serviculon, I hereby accept the appoints ions of all statutes relative to the p my position as registated agent. NRA) Services, Inc. By: (Registe | ment as registered of oper and completed by Bluer and completed by Bluer and | agent and agree to act in the te performance of my dutie: Denise Bell, A. | is captacty I further ago s, and fam familiar with |
| Having been named as redesignated in this applicate to complywith the provision accept the obligations of 8. The name, title or cap. Robert Lawless | otance: egistered agent and to accept serviction, I hereby accept the appoints ions of all statutes relative to the p my position as registered agent. NRA) Services, Inc. By: (Registe active and address of the person(s) | ment as registered of oper and completed by Bluer and completed by Bluer and | agent and agree to act in the te performance of my dutie: Denise Bell, A. | is captacty I further ago s, and fam familiar with |
| Having been named as redesignated in this applicate complywith the provision accept the obligations of 8. The name, title or cap. Robert Lawless Authorized Signer 1621 18th Street, Suite 2: | egistered agent and to accept serviculon, I hereby accept the appointments of all statutes relative to the pmy position as registered agent. NRA) Services, Inc. By: (Registered and address of the person(s) with the person and the person accept and address of the person accept accept and address of the person accept accept accept and address of the person accept a | ment as registered or oper and complete of the proper and complete or open agent's signature of the property o | agent and ugree to act in the performance of my duties Denise Bell, A. ority to manage is/are: | est Secretary |

Typed or printed name of signee

Robert Lawless

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "NXC ORANGE CITY OWNER 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 TWENTIETH DAY OF APRIL, A.D. 2017.

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

J7 APR 17 MI SECKETARY OF SI ruy

6247785 8300 SR# 20172656895

You may verify this certificate online at corp.delaware.gov/authver.shtml

Juffrey W. Stufface, Successory of Stuffs

Authentication: 202405632

Date: 04-20-17