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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)-694-1639

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Foreign Limited Liability Company Tomoka Town Center, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

D. SCOTT

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLONING IS SUBMITTED TO REDISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS INTITIE STATE OF FLORIDA: 1. TOMOKA TOWN CENTER, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L L C.," or "LLC.") (If name unavailable; over abortant come adopted for the purpose of transacting business in Florids. The observate notice must include "Limited Liability Company," "L.L.C," or "LLC,") 2 Delaware (Junistration shife) the low of which foreign limited inhelity company is organized) (FG Humber, a conficable) Upon qualification (Date first teamsacted business in Florada, if prior to registration) | |See sections 603,0904 & 603,0905, F.S. to determine penalty hobility. 5. 400 Clematis Street, Suite 201 6. 2851 John Street, Suite One (Street Address of Principal Office) (Alsolate Address) West Palm Beach, FL Markham, Ontario 33401 L3R 5R7 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporate Creations Network Inc. Name: 11380 Prosperity Farms Road, #221E Office Address: Florida 33401 Palm Beach Gardens 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 comply with 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. Fornando Jimanez, Special Secreti ٠Ţ, 8. The name, title or capacity and address of the person(s) who has/have outhority to manage is/are: <u>Title or Capacity: '</u> Name and Address: Titls or Capacity: Name and Address: John W.S. Preston Jeffrey W. Preston Director Director 400 Cleants Drest, Rule 201 400 Clamana Salest, Seria 301" Ward Palet Balety, FL 20481 Director Robert S. Green Director Michael J. Delmar: 1250 Boul frene-Lovanese West, Rule 100 2011 John Birest, Belle C Method Circula LSR 907 Martinett, October HITE 4948 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 20 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (Afthe certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

t of the exchanged person

Typed or printed name of signee

10. This document is executed in secondance with section \$05.0203 (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.

Robert S. Green

Delaware The First State

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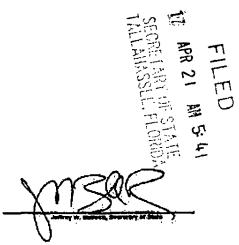
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "TOMOKA TOWN CENTER, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOMOKA TOWN CENTER, LLC" WAS FORMED ON THE TWENTIETH DAY OF APRIL, A.D. 2017.

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

6386472 8300 SR# 20172708532

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



Authentication; 202416601

Date: 04-21-17