(Requestor's Name)
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2017 MAY 10 AM 8: 30

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HAY 1 1 2007 HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 635723 8136031

AUTHORIZATION

COST LIMIT : \$\125.00

ORDER DATE: May 10, 2017

ORDER TIME : 3:21 PM

ORDER NO. : 635723-010

CUSTOMER NO: 8136031

FOREIGN FILINGS

NAME: G&I IX FOUNTAINS CENTER 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:

COVER LETTER

TO:	Registration Section Division of Corpor	on ations							
SUBJ		ins Center LLC							
0020		Name of	Limited Liability Co	mpany	·				
The en Exister	closed "Application by nce, and check are sub-	y Foreign Limited Liability Com mitted to register the above refer	pany for Authorization	on to Tran d liability	sact Business in Florida," company to transact busin	Certificate of ess in Florida			
Please	return all corresponde	nce concerning this matter to the	following:						
	Indira Neg	gron							
Name of Person									
	DRA Advisors LLC								
	Firm/Company								
	220 East 42nd Street, 27th Floor								
			Address						
	New York, New York 10017								
City/State and Zip Code									
	inegron@dr	aadvisors.com							
		E-mail address: (to be use	d for future annual r	eport notif	fication)				
For fu	ther information conc	erning this matter, please call:							
	Indira Negron		212 at (697-474					
	Na	me of Contact Person	Area Code	Dayti	ime 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 Tatlahassee, FL 32301						
Enclos	ed is a check for the fo		□ \$155.00 Filing Certified Copy	Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop				

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

IN COMPLIANCE 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. G&I IX Fountains Cen	ter LLC		CIP O DUTTO N	** ~ W		
(Name of Fore	eign Limited Liability Company; m	ust include "Limited Lia	bility Company," "L.L.C.," or "l	LLC.")		
(If name unavailable, enter al Liability Company," "L.L.C,	Itemate name adopted for the purpo " or "LLC.")	se of transacting busines	s in Florida. The alternate name	must includ	le "Lim	ited
2. Delaware		3.				
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicable)			•
4. upon filing						
· ·	(Date first transacted busin (See sections 605.0904 & 605	ess in Florida, if prior to 5.0905, F.S. to determine	registration.) e penalty liability)			
5. c/o DRA Advisors LL	C, 220 East 42nd Street, 27th Fl	oor, New York, NY 1	0017			
		'n' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '				
(DD	(Street Address of	-				
6. c/o DRA Advisors LLC	C, 220 East 42nd Street, 27th Flo	oor, New York, NY IC	J01 /	Aign	2011	
				55	1017 MAY	
	(Mailing	Address)		E [1]	A	SERVICE:
	Ç B	,		SS	0	
7. Name and street address	ss of Florida registered agent: (I		iadie)	E C	330	-
Name:	Corporation Service Company	<u> </u>	_	FE:S	*	Same A + t
Office Address:	1201 Hays Street			STATE	ထ္ပ ယ	الرسيعة
	Tallahassee		, Florida <u>32301</u>	> '	0	
	(City)		(Zip code)			
designated in this applica	otance: egistered agent and to accept se ution, I hereby accept the appoli ions of all statutes relative to the	ntment as registered a	igent and agree to act in this	capacity.	I furth	her agree
accept the obligations of	my position as registered agent. Corporation Service Compa	inv	Melissa	Zender	•	
	By:	M. Testa	Asst. Vice	-		
	(Regi	stered agent's signature)	Asst. Vio	e i resido	↓III	
8. The name, title or cap	acity and address of the person(s	s) who has/have author	rity to manage is/are:			
Jason Borreo, Vice Presiden	nt, c/o DRA Advisors LLC, 220 Eas	st 42nd Street, 27th Floo	r, New York, NY 10017			
		_ .				
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 d of which it is organized. (If the submitted) Signature	certificate is in a forei	gn language, a translation of	ustody of r the certific	ecords ate und	in the der oath
	Signatu	re of an authorized perso	n			
This document is execute submitted in a document to	d in accordance with section 605 o the Department of State consti	.0203 (1) (b), Florida tutes a third degree fel	Statutes. I am aware that any ony as provided for in s.817.	false infor 155, F.S.	nation	
	Anne Kunz					

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 "G&I IX FOUNTAINS 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 TENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "G&I IX FOUNTAINS CENTER LLC" WAS FORMED ON THE EIGHTH DAY OF MAY, A.D. 2017.

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

Authentication: 202516213

Date: 05-10-17

6404719 8300 SR# 20173313009