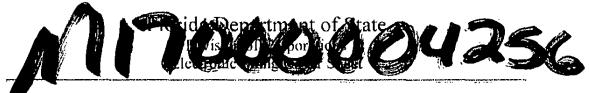
5/18/2017

Division of Corporations



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O SIMMON"

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

XIMPANYTO TRANSACT BU	TION BOOKING FILARIEM STATUTES, THE POLLOWING IS SUMMITTED TO REGISTER A POREIGN LIMITED LI SINISSS INTHE STATE OF FLORIDA:	81 P 11 JE 1
KCP Orlando North, L1	LC ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(144000) 1000	The children company, must menue "Limited Laboutty Company," "L.L.C.," or "L.L.C.,"	
ability Company," "L,L,C,"	itemate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limite" or "LLC.")	d
Delaware	3	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable)	
	(Date first transacted basiness in Storida if prior to registration)	
	(Date first transacted business in Piorida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
21500 Blacayne Blvd S	3te 700	
Aventura, FL 33180		
0) (00 m)	(Street Address of Principal Office)	
21500 Biscayne Blvd S	Re 700	
Aventura, PL 33180		
	(Mailing Address)	
Name and street address	is of Florida registered agent; (P.O. Box NOT seceptable)	
Name;	NRAI Services, Inc.	
Office Address:	1200 South Pine Island Road	
	Plantation , Florida 33324	
	(City) (Zip code)	
esignated in this applica complywith the provision ecopt the obligations of t	igistared agent and to accept service of process for the above stated limited liability company at the pilon, I hereby accept the appointment as registered agent and agree to act in this appacity. I further cons of all statutes relative to the proper and complete performance of my duttes, and I am familiar my position as registered agent. NRAI Services Inc. By: (Registered agent's afgreers)	r agr
. The name, title or caps	acity and address of the person(s) who has/have authority to manage is/are:	
Daniel	ADRS Manager	
21500 9	siscayne blug ste 700	
Aventu	11a FL 33180	
Attached is a certificate in addition under the law of the translator must be so	of existence, no more than 90 days old, duly authenticated by the afficial having custody of records in of which it is organized. (If the certificate is in a foreign language, a translation of the certificate undesubmitted)	n the ir oat
	Signature of an authorized person	
his document is executed	d in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S.	
	Daniel Ades Twoed or orinted name of signee	

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "KCP ORLANDO NORTH, 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 EIGHTEENTH DAY OF MAY, A.D. 2017.

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

Authentication: 202562974

Date: 05-18-17

6386134 8300 SR# 20173700300

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