## MITOCOOHISO

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
_
Special Instructions to Filing Officer:

Office Use Only



800299528038

FILED

17 MAY 24 M 8: 51

SEGRETARY OF STATE
ANN ANASSEE, FLORIDA



D. SCOTT MAY 2 5 2017





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088 5/24/2017 Date:\_\_\_ Name: KENDALL HOWELL T010037 Reference #:\_\_\_\_\_ Entity Name: PENN FLORIDA CLUB PROPERTIES II, LLC ✓ Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent Reinstatement Conversion Merger ☐ Dissolution/Withdrawal ☐ Fictitous Name Other \_\_\_\_\_

Authorized Amount: \_\_\_

Signature:\_\_\_

\$125.00





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Authorized Amount:	\$125.00
Signature:	

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

		11. 01. 14
	name adopted for the purpose of fransacting business in Flor	rida. The alternate name must include "Limited Liability Company," "L.L.C." or
Delaware  (Jurisdiction under the law of w	chich foreign limited liability company is organized)	3. 45-2505210 (FEI number, if applicable)
(	mon policy money employ to expensely	(, <u></u> ,
Upon Filing	(D. 4	
	(Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine	regratures / ne penalty liability)
1515 North Federa		6. 1515 North Federal Highway
(Street Address of Suite 306	Principal Office)	(Mailing Address) Suite 306
Boca Raton, FL 334	122	Boca Raton, FL 33432
boca Raion, r.L. 33-	132	150Ca (Valori, 1 L 55452
Managara da		NOT acceptable)
Name and <u>street addre</u>	ss of Florida registered agent: (P.O. Box	NOT acceptable)
Name:	Robert Rabin	
Office Address:	1515 N. Federal Highway, Suite 30	06
Office / fuel cost		
	Boca Raton	Florida 33432
iving been named as re signated in this applica comply with the provis	gistered agent and to accept service of pation, I hereby accept the appointment as	, Florida 33432  (Zip code)  process for the above stated limited liability company as registered agent and agree to act in this capacity! If and complete performance of my duties, and I din fair
iving been named as re signated in this applica comply with the provis	stance: egistered agent and to accept service of p tion, I hereby accept the appointment as lons of all statutes relative to the proper	process for the above stated limited liability company a s registered agent and agree to act in this capacity: Lf
signated in this application comply with the provis	stance: egistered agent and to accept service of p tion, I hereby accept the appointment as lons of all statutes relative to the proper	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far
uving been named as resignated in this application of the comply with the provision accept the obligation	stance: egistered agent and to accept service of p etion, I hereby accept the appointment as lons of all statutes relative to the proper is of my position as registered agent.  (Registered agent's s	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far fignature)
uving been named as resignated in this application of the comply with the provision accept the obligation	stance: egistered agent and to accept service of p egistered agent and to accept service of p egion, I hereby accept the appointment as ions of all statutes relative to the proper es of my position as registered agent.	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far fignature)
aving been named as resignated in this application comply with the provised accept the obligation.  The name, title or caparity:	estance: egistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent.  (Registered agent's secity and address of the person(s) who has	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far highesture)
aving been named as resignated in this application comply with the provision accept the obligation.  The name, title or cap	ntance: registered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the property of my position as registered agent.  (Registered agent:  (Registered agent:  (Registered agent:  American Address:  Mark A. Genshelmer  1515 N. Federal Highway, Suite 306	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far highesture)
aving been named as resignated in this application comply with the provised accept the obligation.  The name, title or caparity:	egistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.  (Registered agent's accity and address of the person(s) who has Name and Address:  Mark A. Genshelmer	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far highesture)
aving been named as resignated in this application comply with the provised accept the obligation.  The name, title or caparity:	ntance: registered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the property of my position as registered agent.  (Registered agent:  (Registered agent:  (Registered agent:  American Address:  Mark A. Genshelmer  1515 N. Federal Highway, Suite 306	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far highesture)
aving been named as resignated in this application this application with the provised accept the obligation.  The name, title or capacity:	ntance: registered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the property of my position as registered agent.  (Registered agent:  (Registered agent:  (Registered agent:  American Address:  Mark A. Genshelmer  1515 N. Federal Highway, Suite 306	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far highesture)
aving been named as resignated in this application comply with the provised accept the obligation.  The name, title or caparity:	ntance: registered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the property of my position as registered agent.  (Registered agent:  (Registered agent:  (Registered agent:  American Address:  Mark A. Genshelmer  1515 N. Federal Highway, Suite 306	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far highesture)
aving been named as resignated in this application the provised accept the obligation.  The name, title or cap.  Title or Capacity:  Manager	egistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.  (Registered agent's statity and address of the person(s) who has Name and Address:  Mark A. Genshelmer  [515 N. Federal Highway, Suite 306]  Becs Raion, Fl. 33432	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I am far highesture)
aving been named as resignated in this application this application with the provision accept the obligation.  The name, title or caparity:  Manager  Use attachments if necessity in the caparity in the caparity:	egistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.  (Registered agent's statity and address of the person(s) who has Name and Address:  Mark A. Genshelmer  1515 N. Federal Highway, Suke 306 Bees Rabon, Fl. 33432	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature of the complete performance of my duties, and I din fair signature of the complete performance of my duties, and I din fair signature of the complete performance of my duties, and I din fair signature of the complete performance of my duties of the complete performance of the complete performan
aving been named as resignated in this application this application with the provision accept the obligation.  The name, title or caparity:  Manager  Use attachments if necesses that ached is a certificate.	egistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.  (Registered agent:  (Registered agent:  American and Address:  Mark A. Gensheimer  1515 N. Federal Highway, Suke 306  Bocs Rabon, Fl. 33432  stary)  cof existence, no more than 90 days old, 5	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I din fair signature)  Is/have authority to manage is/are:  Title or Capacity:  Name and Addr.
aving been named as resignated in this application this application with the provision accept the obligation.  The name, title or caparity:  Manager  Attached is a certificate is diction under the law	egistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.  (Registered agent's static acity and address of the person(s) who has Name and Address:  Mark A. Gensheimer  1515 N. Federal Highway, Suite 306  Becs Rabon, Fl. 33432  stary)  of existence, no more than 90 days old, cof which it is organized. (If the certificate	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature)  In the complete performance of my duties, and I din fair signature of the complete performance of my duties, and I din fair signature of the complete performance of my duties, and I din fair signature of the complete performance of my duties, and I din fair signature of the complete performance of my duties of the complete performance of the complete performan
aving been named as resignated in this application this application with the provision accept the obligation.  The name, title or caparity:  Manager  Use attachments if necesses that ached is a certificate.	egistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.  (Registered agent's static acity and address of the person(s) who has Name and Address:  Mark A. Gensheimer  1515 N. Federal Highway, Suite 306  Becs Rabon, Fl. 33432  stary)  of existence, no more than 90 days old, cof which it is organized. (If the certificate	process for the above stated limited liability company as registered agent and agree to act in this capacity. If and complete performance of my duties, and I din fair signature)  Is/have authority to manage is/are:  Title or Capacity:  Name and Addr.

Typed or printed same of signee

Mark A. Gensheimer

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PENN FLORIDA CLUB PROPERTIES II, 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-THIRD DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PENN FLORIDA CLUB PROPERTIES II, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF MAY, A.D. 2017.

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



Authentication: 202587091

Date: 05-23-17

6420209 8300 SR# 20173915526

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