Division of Corporations Electronic Filing Cover Sheet

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(((H17000163342 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383 1.

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone

: (800)345-4647

Fax Number

: (800) 432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company SAND LAKE ACQUISITION (GP) LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

JUN 23 2017

COVER LETTER

TO:	Registration Section Division of Corporations	•	
SUBJE	IECT: Sand Lake Acquisition (GP) LLC Name of Lin	ilted Liability Company	
The en	inclosed "Application by Foreign Limited Liability Companience, and check are submitted to register the above reference	y for Authorization to Transact Business in Florida," Certificate o ed foreign ilmited liability company to transact business in Florida	
Please	e return all correspondence concerning this matter to the fol	lowing:	
	-	E.	
Name of Person			
Capitol Services - Corporate Filings Team			
Firm/Company			
	206 E. 9th St., Ste. 1300		
	Address		
Austin TX 78701 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For fur	urther information concerning this matter, please call:		
		at (800) 345-4847	
	Name of Contact Person	Area Code Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	
	Registration Section P.O. Box 6327	Registration Section Clifton Building	
	Tallahussec, FL 32314	2661 Executive Center Circle Talishasses, FL 3230 l	
Enclos	sed is a check for the following amount: S125.00 Filing Fee	3155,00 Filing Fee & 5160.00 Filing Fee, Certificate of Status & Certified Copy	

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

IN COMPLANCE WITH SECTION 603.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COVB'AN' TO TRANSACT DUSINESS IN THE STATE OF FLORIDAL 1, Sand Lake Acquisition (GP) LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC." or "LLC.") (If name unarablishe, exter distracts name adopted for the purpose of transacting business or Floride. The alternate name count recitable "Liceited Listelley Company," "], 1, C," or "LLC") 2. Delaware PHI number, if applicable (Date Best transacted business in Florale, if prior to registrates)
(See sections 603 0904 & 603 0905, F.S. to determine porefly lighthan) 5. 11525 Community Center Drive 5. 3280 Bloor St W, Centre Tower, Ste 1400 Street Address of Principal Office) (Mailting Address) Northglenn, Colorado 80233 Toronto, ON M8X 2X3 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Capitol Corporate Services, Inc. 155 Office Plaza Dr Ste A Office Address: Tallehessee Registered agent's acceptance: Hoving 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 statutas 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. Krista Ali, Asst. Secretary on behalf of Capitol Corporate Services, Inc. (Regultered agent's argustere) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: President/Treasurer Evan Kirsh 3289 Bloor SI W. Centre Tower, Ste 1400 Toronto, ON MBX 2X3 Secretary David Hanick 3280 Bloor SI W, Centre Tower, Ste 1400 Toronto, ON M8X 2X3 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (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.

Typed or printed nume of signer

Evan Kirsh, President

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SAND LAKE ACQUISITION (GP) 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 NINETEENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAND LAKE ACQUISITION (GP) LLC" WAS FORMED ON THE SIXTH DAY OF JUNE, A.D. 2017.

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

6436195 8300

SR# 20174828546

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

Authentication: 202734826

Date: 06-19-17



June 21, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

CAPITOL SERVICES, INC.

SUBJECT: SAND LAKE ACQUISITION (GP) LLC

AS THE FILE DATE — 6/19/17************

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

If you have any further questions concerning your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II Registration Section FAX Aud. #: H17000163342 Letter Number: 717A00012552

16

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314