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AUTHORIZATION: ABBIE/PAUL HODGE

### COVER LETTER

TO:		ation Section n of Corporation	os.				
SUBJE	SE CT:	EPTARIA HOLDI	NGS, LLC				
			Name of I	Limited Liability C	Company		
						unsact Business in Florida," Certificate y company to transact business in Flor	
Please	return all	correspondence c	oncerning this matter to the	following:		•	
		Karen Rodrigue	cz				
			N	ame of Person			
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		1720 Windward	d Concourse, S. 390				
		· <u></u>		Address			
		Alpharetta, GA	30005				
		<del></del>	City/S	tate and Zip Code	•		
		saulb@gtlaw.cor	n				
			E-mail address: (to be used	for future annual	report not	ification)	
For fur	ther infor	mation concernin	g this matter, please call:				
	Karen	Rodriguez		770 at (	777-20	91	
		Name o	f Contact Person	Arca Code	Day	rtime Telephone Number	
	Divisio Registr P.O. Bo	ING ADDRESS: n of Corporations ation Section ox 6327 issee, FL 32314			Division Registrat Clifton B 2661 Exe	ADDRESS: of Corporations ion Section wilding centive Center Circle see, FL 32301	
Enclos		eck for the follow 5.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

# 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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Comment of the contract of the	name adopted for the purpose of transacting business in	Charles The alternate come source instead of imited I	india. Company Part I Care MI Care
•	lating adobted for the birbose of transacting outliness in	Profits. The attentiate timbe think include. Limited L	mining Company, LCC, or LLC )
Delaware	shieli foreign lamied hability company is organized)	3	mber, if applicable)
(3) MEI 2011 12-Direct Georgia (1996 OF A	viten rowthin trimed transfer company is organized)	(rei nu	mer, is applicable)
	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to dete	to registration.)	
1460 D-!-111 A			
1450 Brickell Avenue		6. 1450 Brickell Avenue	ddiess)
18th Floor	Thirdpin Office,	18th Floor	590 <b>=</b>
		Miami El 33131	
Miami, FL 33131	<del> </del>	Miami, FL 33131	
. Name and street addre	ess of Florida registered agent: (P.O. B	ox <u>NOT</u> acceptable)	126 P
Name:	NRAI Services, Inc.		二
Office Address:	1200 South Pine Island Road		er Flori
	Plantation	22224	
		P12.1. 31329	
laving been named as r esignated in this applic o comply with the provi	(City)	t as registered agent and agree to a	ed liability company at the place ct in this capacity. I further ag
esignated in this applic comply with the provi	(City) ptance: registered agent and to accept service of ation, I hereby accept the appointmen sions of all statutes relative to the prop	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m	ed liability company at the place ct in this capacity. I further ag
laving been named as resignated in this applic o comply with the provi- nd accept the obligation	ptance: registered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the property of my position as registered agent.  (Registered agent)	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m Www. n's signatuse)	ed llability company at the plac ct in this capacity. I further ag y duties, and I am famillar wit
laving been named as resignated in this applic o comply with the provi- nd accept the obligation	(City)  ptance: registered agent and to accept service of ation, I hereby accept the appointmen sions of all statutes relative to the property of my position as registered agent.  May Pa	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m Www. n's signatuse)	ed llability company at the plac ct in this capacity. I further ag y duties, and I am famillar wit
taving been named as resignated in this applic of comply with the provinal accept the obligation.  The name, title or capacity:	ptance: registered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the property of my position as registered agent.  (Registered agent accity and address of the person(s) who Name and Address:	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m on's signature) has/have authority to manage is/are	ed llability company at the plac ct in this capacity. I further ag y duties, and I am famillar wit
laving been named as resignated in this applic to comply with the provi- and accept the obligation B. The name, title or cap	ptance: registered agent and to accept service of ation, I hereby accept the appointment is of all statutes relative to the property of my position as registered agent.  (Registered agent accity and address of the person(s) who	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m on's signature) has/have authority to manage is/are Title or Capacity:	ed llability company at the plac ct in this capacity. I further ag y duties, and I am famillar wit
laving been named as resignated in this applic to comply with the provi- nd accept the obligation 3. The name, title or cap Title or Capacity:	ptance: registered agent and to accept service of ation, I hereby accept the appointment is of all statutes relative to the properties of my position as registered agent.  (Registered agent accept the appointment agent accept and address of the person(s) who Name and Address:  Elena Bevza  1450 Brickell Avenue, 18th	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m on's signature) has/have authority to manage is/are Title or Capacity:	ed llability company at the plac ct in this capacity. I further ag y duties, and I am famillar wit
faving been named as resignated in this applicate comply with the provious accept the obligation.  The name, title or capacity:  Manager	ptance: registered agent and to accept service of ation, I hereby accept the appointment is of all statutes relative to the property of the position as registered agent.  (Registered agent or accity and address of the person(s) who Name and Address:  Elena Bevza  1450 Brickell Avenue, 1811 Miami, 171, 33131	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m on's signature) has/have authority to manage is/are Title or Capacity:	ed llability company at the plac ct in this capacity. I further ag y duties, and I am famillar wit
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Taving been named as resignated in this applicated in this applicate comply with the providend accept the obligation.  The name, title or capacity:  Manager  Use attachments if necess.  Attached is a certificate	ptance: registered agent and to accept service of ation, I hereby accept the appointment is of all statutes relative to the property of the project of my position as registered agent.  (Registered agent of the person(s) who name and Address:  Elena Bevza  1450 Brickell Avenue, 1811  Miami, 171, 33131  essary)  e of existence, no more than 90 days of which it is organized. (If the certification of the person of the pers	(Zipe of process for the above stated limit t as registered agent and agree to a per and complete performance of m  on's signature) has/have authority to manage is/are Title or Capacity:	ed liability company at the place in this capacity. I further agy duties, and I am familiar with the place of

Typed or printed name of signes

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SEPTARIA HOLDINGS, 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-SIXTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SEPTARIA"

HOLDINGS, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF APRIL, A.D.

2016.

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

6026169 8300 SR# 20174939559 Authentication: 202776642

Date: 06-26-17

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