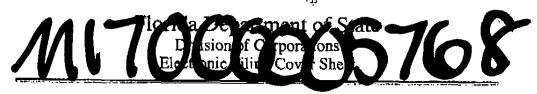
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D. SCOTT Help1 0 2017

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 WABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate re	wise adopted for the purpose of transacting business in Pk	rida. The alternate name must include "Limited Link	nilly Company," "L.L.C," or "LLC.")
Delaware		3	
(Jurisdiction under the law of wh	ich freeign Illreico liability company is organized)	distr.	er, if applicable)
_			
·	(Data first transported business in Plorida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	regulation.) ine paralty liability)	
598 NW 9th Court		6. 598 NW 9th Court	
(Street Address of P	•	Mailing Adda Boca Raton, FL 33486	ress)
Boca Raton, FL 33486		Boca Raion, PL 33480	
. Name and street addres	g of Florida registered agent: (P.O. Bo)	NOT acceptable)	
Namo:	Proskauer Rose LLP		
Office Address:	2255 Glades Road, Suite 421A		
	Boca Raton	, Florida 33431 (Zip cod	
	(City)	(Zip cod	e)
o comply with the provisi	tion, I hereby accept the appointment of one of all statutes relative to the proper s of my position as fegistered agent. (Residence agent	24	in this capacity. I further agr
o comply with the provisi and accept the obligation:	(Remarks of the person(s) who have and Address: Beth F. Lebovitz 598 NW 9th Court	Colloon Ward,	duties, and I am familiar with هـــــ
o comply with the provision accept the obligations B. The name, title or cape Title or Capacity:	ons of all statutes relative to the propers of my position as legistered agent. (Resident Spenished and Address of the person(s) who have and Address: Beth F. Lebovitz	Collect Ward, as/have authority to manage is/are:	in this capacity. I further ago duties, and I am familiar with Attorney-in-fact? Name and Address:
o comply with the provisind accept the obligations 3. The name, title or capt Title or Capacity: Manager	ions of all statutes relative to the propers of my position as registered agent. (Reministrative and Address of the person(s) who hame and Address: Beth F. Lebovitz 598 NW 9th Court Boca Raton, FL 33486	Collect Ward, as/have authority to manage is/are:	in this capacity. I further agidules, and I am familiar with Attorney-in-fact? Name and Address:
B. The name, title or cape Title or Capacity: Manager (Use attachments if neces Attached is a certificate urisdiction under the law	cons of all statutes relative to the propers of my position as fegistered agent. (Reinferrougent and Address: Beth F. Lebovitz 598 NW 9th Court Boca Raton, FL 33486 sery) of existence, no more than 90 days old of which it is organized. (If the certifica	cand complete performance of my Collocn Ward, Collocn Ward, as/have authority to manage is/are: Title or Capacity:	in this capacity. I further against and I am familiar with Attorney-in-fact? Name and Address:
B. The name, title or cape Title or Capacity; Manager (Use attachments if neces). Attached is a certificate urisdiction under the law of the translator must be st	sof my position as fegistered agent. (Return rough) (Return	colloca Ward, Colloca Ward, Agrange authority to manage is/are: Title or Capacity: duly authenticated by the official hate is in a foreign language, a translate of the collocation of	in this capacity. I further against and I am familiar with Attorney-in-fact? Name and Address: Aving custody of records in the bion of the certificate under out that any false information
B. The name, title or cape Title or Capacity; Manager (Use attachments if neces). Attached is a certificate urisdiction under the law of the translator must be st	sof my position as fegistered agent. (Return rough) (Return	cand complete performance of my Colloca Ward, Colloca Ward, as/have authority to manage is/are: Title or Capacity: duly authenticated by the official hate is in a foreign language, a translate is in a foreign language.	in this capacity. I further ag duties, and I am familiar with Attorney-in-fact? Name and Address: Aving custody of records in the tion of the certificate under our that any false information

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "3601 LILROY 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 SIXTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3601 LILROY HOLDINGS LLC" WAS FORMED ON THE SIXTH DAY OF JULY, A.D. 2017.

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

77

Authentication: 202837244

Date: 07-06-17

6468516 8300 SR# 20175112619

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