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Florida Department of State

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

IN COMPLIANCE WITH SECTION 615.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: ARNOTT INTERMEDIATE, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC") (If name unavasistic, order atternate many adopted for the purpose of transacting business is Florids. The alternate name mass include "Limited Liability Company," "L.L.C," or "LLC.") 3. 82-1777446 (FE member, if applicable) (Jurisdiction under the law of which lovergn lemned liability company is organized) (Clear first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0903, F.S. to determine penalty liability) 100 Sea Ray Drive 5, 100 Sea Ray Drive (Mailing Address) (Street Address of Principal Office) Merritt Island, Florida 32953 Merritt Island, Florida 32953 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT CORPORATION SYSTEM Name: 1200 S Pine Island Rd #250 Office Address: Plantation (City) Registered agent's acceptance: Having 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 copacity. I further agree to comply with the provisions of all statutes 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. Madonna Cuddihy, Asst. Secretary (Regulared agent's aignature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Name and Address: Title or Capacity: Title or Capacity: See Attachment (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 oath 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. Summer of an authorized person

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ATTACHMENT TO APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA OF ARNOTT INTERMEDIATE, LLC

Item 8 (continued):

The name, title or capacity, and the address of the person(s) who have authority to manage are:

Title or Capacity	Name and Address
President	Adam M. Arnott 9868 Kilgore Road Orlando, Florida 32836
CEO, CFO, Treasurer, Secretary and Manager	Todd E. Nash 100 Sea Ray Drive Merritt Island, Florida 32953
Manager	Ethan Thurow 580 California Street, 22nd Floor San Francisco, California 94104
Manager	Andrew Holmes 580 California Street, 22nd Floor San Francisco, California 94104

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

DELAWARE, DO HEREBY CERTIFY "ARNOTT INTERMEDIATE, 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 TWELFTH DAY OF JUNE, A.D. 2017.

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

INTERMEDIATE, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF MAY, A.D.

2017.

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

. E.

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Jettrey W. Bacheck, Enemalary of String

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