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□ SCOTT AUG 1 0 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE : 701641 7264129 AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: June 27, 2017 ORDER TIME : 1:08 PM ORDER NO. : 701641-055 CUSTOMER NO: 7264129 FOREIGN FILINGS NAME: PREMIERE IV L.L.C. XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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 LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDAY Premiere IV, L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LLC.") (If name unavailable, onter alternate name adopted for the purpose of transacting business in Florida. The alternate route must include "Limited Liability Company," "L.L.C," or "LLC," or 7 Delaware 3, 37-1365918 (Jurisdiction under the law of which foreign brused liability contrary is organized) (FEI number, if applicable) (Dote first transacted huncess in Florida if prior to registration.)
[See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 197 Clarendon Street C-08-99 Boston, MA 02116 197 Clarendon Street C-08-99 Boston, MA 02416, (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (Cay) 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 capacity. 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. Corporation Service Company Melissa Zender (Registered secol's sure Asst. Vice President 8. 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: Manager Hancock Natural Resource Group, Inc. 197 Clarendon Street C-08-99 Boston, MA 02116 (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. Hancock Natural Resource Group, Inc., Manager By: Margaret Bengen, Secretary

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PREMIERE IV, L.L.C." 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 NINTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PREMIERE IV, L.L.C." WAS FORMED ON THE TWENTY-SECOND DAY OF MAY, A.D. 2015.

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

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Authentication: 203028944

Date: 08-09-17

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