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17 AUG 18 AM 9: 47 DIVISION OF CORFORDIATIONS

FILED

REC 17 ACS L SQUEETA CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 776180 4303929

AUTHORIZATION CAPILLO CONTROLLA CONT

COST LIMIT : \$\(\)\$\(155.00 \)

ORDER DATE: August 18, 2017

ORDER TIME : 2:54 PM

ORDER NO. : 776180-005

CUSTOMER NO: 4303929

FOREIGN FILINGS

NAME: MWC BLOCK A, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX 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 FLORIDA: MWC BLOCK A, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") APPLIED FOR DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) **UPON FILING OF THIS APPLICATION** (Date first transacted business in Florida, if prior to registration.) (See sections 603.0904 & 605.0905, F.S. to determine penalty liability) FILED
TANG 18 AH 9: 47
OKTON OF COMMON ACCOUNTS I TOWN CENTER ROAD, STE 600 **BOCA RATON, FLORIDA 33486** (Street Address of Principal Office) I TOWN CENTER ROAD, STE 600 **BOCA RATON, FLORIDA 33486** (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 Florida 32301 Registered agout'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 complywith 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. Melissa Zender Asst. Vice President 3. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: MWC BLOCK A MANAGER, INC. - Sole Member I TOWN CENTER ROAD, STE 600 **BOCA RATON, FLORIDA 33486** 9. Attached is a certificate of existence, no more than 90 days old, duty authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the of refficate is in a foreign language, a translation of the certificate under oath

Signature of an authorized person

Nitin Motwani, Managing Director

Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (1), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellowy as provided for in s.817.155, F.S.

of the translator must be submitted)



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

DELAWARE, DO HEREBY CERTIFY "MWC BLOCK A, 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 EIGHTEENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MWC BLOCK A, LLC" WAS FORMED ON THE ELEVENTH DAY OF AUGUST, A.D. 2017.

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

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SR# 20175793846

Authentication: 203084095

Date: 08-18-17