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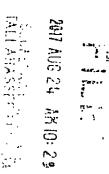
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M. HARRIE

COVER LETTER

Registration Section

TO:

Divis	ion of Corporation	IS .							
SUBJECT: _	Sullivan Value H	oldings, LLC							
_			imited Liability C	ompany					
					nsact Business in Florida," Certifica company to transact business in Fl				
Please return a	III correspondence c	oncerning this matter to the I	following:						
	Donna Colavito)							
		Na	me of Person						
	Granite Associa	ites, LP							
		Fir	ın/Company						
	225 Banyan Bo	ulevard, Suite 130							
	Address								
	Naples, FL 341	02							
		City/St	ate and Zip Code						
	dcolavito@grani	telp.com							
		E-mail address: (to be used	for future annual	report not	ification)				
For further inf	ormation concerning	g this matter, please call:							
Doni	na Colavito		239 at (228-650	00				
 -	Name o	f Contact Person	Area Code	Day	time Telephone Number				
Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301				
	check for the follow 25.00 Filing Fee	ing amount: \$\Bigsim \text{S130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy				

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 COMPANY TO TRANSACT BUSINESS: IN THE STATE OF FLORIDA:

name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rrida, The a	Itemato name anist include "Limited Liability	Company ""L.L.C."	or "LC.")	
Delaware			81-0725944			
(Jurisdiction under the law of wi	nich foreign limited liability company is organized)	Э.	(FEI number, i	(applicable)		
	(Date first transacted husiness in Florids, if prior to (See sections 605.0904 & 605.0905, P.S. to determ	registration line penalty	i.) liability)		•	
225 Banyan Boulevar	d, Suite 130	6.	225 Banyan Boulevard, Suite	130		
(Sireet Address of F	rincipal Office)		(Mailing Address)	2 5	281	
Naples, FL 34102			Naples, FL 34102		=======================================	4.3 -4
						≪ €
				سور مرد	24	7
Name and street address	s of Florida registered agent: (P.O. Bo)	x <u>NOT</u>	acceptable)	144	**	
Name:	United Corporate Services, Inc.				707	•
rvame;				(3).	₽	•
Office Address:	9200 South Dadeland Blvd, Suite 508			건	رم د	
	Miani		, Florida 33156 (Zip code)	200	N.P.	
			, r 101 10a			
aving been named as resignated in this applica comply with the provis	rgistered agent and to accept service of thon, I hereby accept the appointment of thos of all statutes relative to the prope s of my position goregistered agent	us regist r and co	for the above stated limited lid ered agent and agree to act in	this capacity. I	further	agi
esignated in this applica comply with the provis nd accept the obligation	stance: egistered agent and to accept service of etion, I hereby accept the appointment of etions of all statutes relative to the proper s of my position as registered agent. (Registered agent's	us regist r and co	for the above stated limited licered agent and agree to act in implete performance of my during the per	this capacity. I	further	agr
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Taving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap. Title or Capacity: Manager Use attachments if necestrisdiction under the law if the translator must be so. This document is executed.	estance: registered agent and to accept service of eston, I hereby accept the appointment of the soft all statutes relative to the property of my position goregistered agent. Registered agent and to accept service of the property of my position goregistered agent. Registered agent agent accept and address of the person(s) who have and Address: Adam Gerry Co Granite Associates, LP 225 Banyan Blvd, Suite 130 Naples, Florida 34102 stary) cof existence, no more than 90 days old, of which it is organized. (If the certificate of the Department of State constitutes at the department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the Department of State constitutes at the service of the serv	as register and co	for the above stated limited lidered agent and agree to act in implete performance of my dust president, United Corporate Service authority to manage is/are: itle or Capacity: Attenticated by the official having a foreign language, a translation of the provided for in s.8	this capacity. Ities, and I am for the capacity. Ities, and I am for the capacity of real of the certifical that any false infinitely.	ress:	the oath
Taving been named as resignated in this applicate comply with the provising accept the obligation. The name, title or cap. Title or Capacity: Manager Use attachments if necestrisdiction under the law if the translator must be so. This document is executed.	egistered agent and to accept service of edion, I hereby accept the appointment of the soft all statutes relative to the propers of my position goregistered agent. (Registered agent's accity and address of the person(s) who have and Address: Adam Gerry (O Granite Associates, LP 225 Banyan Blvd, Suite 130) Naples, Florida 34102 (Sary) (Soft existence, no more than 90 days old, of which it is organized. (If the certificate and mitted)	as register and co	for the above stated limited lidered agent and agree to act in implete performance of my dust president, United Corporate Service authority to manage is/are: itle or Capacity: Attenticated by the official having a foreign language, a translation of the provided for in s.8	this capacity. Ities, and I am for the capacity. Ities, and I am for the capacity of real of the certifical that any false infinitely.	ress:	the oath

Page 1



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

DELAWARE, DO HEREBY CERTIFY "SULLIVAN VALUE 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 NINETEENTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SULLIVAN VALUE HOLDINGS, LLC" WAS FORMED ON THE THIRD DAY OF DECEMBER, A.D. 2015.

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

Authentication: 202909488

Date: 07-19-17

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