Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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

IN COMPLIANCE WITH SECTION 605 6902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: MILL CREEK, L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L. L.C.," or "LLC.") MILL CREEK (KS), L.L.C. (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.") 2 KANSAS (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) N/A(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 3030 N. ROCKY POINT DR, STE 150A, TAMPA, FL 33607 (Street Address of Principal Office) 3030 N. ROCKY POINT DR, STE 150A, TAMPA, FL 33607 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NORTHWEST REGISTERED AGENT LLC Name: 3030 N. ROCKY POINT DRIVE, STE 150A Office Address: TAMPA 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 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: C. KEVIN ROGERS, MEMBER, 3030 N. ROCKY POINT DR, STE 150A, TAMPA, FL 33607 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) Signature of an authorized person

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.

Typed or printed name of signee

MORGAN NOBLE

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6219968

Entity Name: MILL CREEK, L.L.C.

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: MILL CREEK, L.L.C.

Registered Office: 5425 Antioch Drive, MERRIAM, KS 66202

was filed in this office on December 18, 2007, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of September 14, 2017

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 975526 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/yalidate and enter the certificate ID number.