Page 2 of 5

12122023573 From: Kimberly Laughrey

Division of Corporations

10/27/2017

Florida Department of State

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111.

COVER LETTER

	Benchmark Navarr	e LLC				
SUBJECT:	Name of Limited Liability Company					
The enclosed Existence, an	"Application by Fo d check are submitt	reign Limited Liability Comed to register the above refer	pany for Authorizatenced foreign limi	ation to Tr ited liabilit	ransact Business in Florida," Certific ty company to transact business in Fl	
Please return	ali correspondence	concerning this matter to the	following:			
	Steven J. Long	30				
	 -	N	lame of Person			
	Benchmark Po	operties Management Corp				
		F	imv/Company			
	4053 Maple Re	oad, Suite 200				
	·· · · · · · · · · · · · · · · · · · ·		Address			
	Amherst, NY	14226				
		City/S	State and Zip Code			
	slongo@benchm					
		E-mail address: (to be use	d for future annua	герог: по	tification)	
For further in	formation concernia	ng this matter, please call:				
Stev	e Longo		716	833-49	86	
	Name	of Contact Person	Area Code	Day	ytime Telephone Number	
Divl Regi P.O.	LLING ADDRESS sion of Corporation stration Section Box 6327 thassee, FL 32314			Division Registrat Clifton B 2661 Exc	r ADDRESS: of Corporations ition: Section huilding ecutive Center Circle see, FL 32301	
	check for the follow 125.00 Filing Fee	ving amount; 2 \$130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy		S160.00 Filing Fee, Certificate of Status & Certified Copy	

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

	.C		
(Maine of Forcign	Limited Liability Company; must include "Limited	1 Liability Company," "LL.C.," or "LLC.	· · · · · · · · · · · · · · · · · · ·
(If name unswallable, onless alternate of	ame adopted for the purpose of transacting business in Plot	ids. The sitemets name must include "Limited L	ability Company, ""L.L.C," or "LLC.")
2 Delaware		3	
(Jurisdiction under the law of w	nich foreign tentted fability company is organised)	(FEI nu	rabor, if applicable)
4	(Date first transacted trastrates in Florida, if prior to a (See sections 605 0904 & 605 0905, F.S. to determin	ogkiration.)	
4062 N (L. D & G)		6. 4053 Maple Road, Suite 20	ın
5. 4053 Maple Road, Sui	riccinal Office)	6. Medica Ad	idees)
Amherst, NY 14226	•	Amherst, NY 14226	
			·
7. Name and street addres	g of Florida registered agent: (P.O. Box	NOT acceptable)	
	C T Corporation System		
Name:			7 s
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida 33324	는 1
	(Cip)	(Zip o	ods)
legistered agent's accop	tance: gistered agent and so accept service of p		$\omega \equiv \omega$
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• • •	a m a \ \ \ \ \	Peter F. Souza Assistant Secreta	ည္း မ
	By: C T Corporation System	Peter F. Souza Assistant Secreta	ary ORIDA
B. The name, title or caps	By: CT Comporation System	Peter F. Souza Assistant Secreta	ary ORIDA
B. The name, title or capt Title or Capacity:	By: C T Comporation System acity and address of the person(s) who has Name and Address:	Peter F. Souza Assistant Secreta Whave authority to manage is/are:	Name and Address: Jeffrey A. Withee
8. The name, title or capt Title or Capacity: VP of Manager	acity and address of the person(s) who has Name and Address: Steven J. Longo 4053 Maple Rd. Suite 200	Peter F. Souza Assistant Secreta whave authority to manage is/are: Title or Capacity: VP of Manager Bencomark Properties	Name and Address: Jeffrey A. Withee 4053 Maple Rd, Suite 20
B. The name, title or caps Title or Capacity: VP of Manager chmark Properties	By: C T Comporation System acity and address of the person(s) who has Name and Address:	Peter F. Souza Assistant Secreta whave authority to manage is/are: Title or Capacity: VP of Manager	Name and Address: Jeffrey A. Withee
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B. The name, title or caps Title or Capacity: VP of Manager chmark Properties nagement Corp.	By: C T Corporation System acity and address of the person(s) who has Name and Address: Steven J. Longo 4053 Maple Rd. Suite 200 Amherst. NY 14226	Peter F. Souza Assistant Secreta whave authority to manage is/are: Title or Capacity: VP of Manager Bencomark Properties	Name and Address: Jeffrey A. Withee 4053 Maple Rd, Suite 20
B. The name, title or caps Title or Capacity: VP of Manager chmark Properties nagement Corp.	By: C T Comporation System acity and address of the person(s) who has Name and Address: Stoven J. Longo 4053 Maple Rd. Suite 200 Amherst. NY 14226	Peter F. Souza Assistant Secreta Assistant Secreta where authority to manage is/are: Title or Capacity: VP of Manager Bencamark Properties Management Corp.	Name and Address: Jeffrey A. Withoe 4053 Maple Rd, Suite 204 Antherst, NY 14226
8. The name, title or caps Title or Capacity: VP of Manager chmark Properties nagement Corp.	Steven J. Longo 4053 Maple Rd. Suite 200 Amherst. NY 14226	Peter F. Souza Assistant Secreta Assistant Secreta where authority to manage is/are: Title or Capacity: VP of Manager Bencamark Properties Man: gement Corp.	Name and Address: Jeffrey A. Withee 4053 Maple Rd, Suite 200 Antherst, NY 14226
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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "BENCHMARK NAVARRE 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 TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2017.

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

6593795 8300 SR# 20176829519

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jordinery M. Brancher, Experience of STaffa

Authentication: 203476835

Date: 10-27-17