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115 N CALHOUN ST., STE. 4 TALLAHASSEE. FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088 Date: December 20, 2017 **ERIC HOOD** Name:____ T013988 Reference #:____ OWL CREEK GP, LLC Entity Name:_____ Articles of Incorporation/Authorization to Transact Business ENE FIRST ☐ Amendment Change of Agent Reinstatement Conversion Merger Dissolution/Withdrawal] Fictitous Name Other Authorized Amount:

Signature:

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

IN COMPLIANCE WITH SECTI COMPANY TO TRANSACT BUS	'ON 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY. INESS IN THE STATE OF FLORIDA:
1. Out	GER FOR LLC
(Name of Foreign Li	mited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(if name unavailable, enter afternate gam	se adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. De 10	ibarc 3.
(Jurisdiction under the law of which	h foreign limited liability company is organized) (Fill number, if applicable)
4	(Date first transacted histories in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability)
· 640 Fifth	(See sections 605 0904 & 605 0905, F.S. to determine penalty liability) Average 120 Flore
(Street Address of) no	(Mashing Address)
	10019 My MY 10019
7. Name and street address	of Florida registered agent: (P.O. Box NOT acceptable)
Name:	COGENCY GLOBAL INC.
Office Address:	115 North Calhoun Street, Suite 4
_	Tallahassee Florida 32301
Registered agent's accepta	(City) (Zip code)
Having been named as regi	stered agent and to accept service of process for the above stated limited liability coffingly at the place
designated in this application to comply with the provision	on, I hereby accept the appointment as registered agent and agree to act in this capacity. I farther agree is of all statutes relative to the proper and complete performance of my duties, and I am familiar with
and accept the obligations of	f my position as registered agent.
_	EBILOOC ASSISTANT SECRETARY TE IT
	(Registered agent's stgnature)
8. The name, title or capaci <u>Title or Capacity:</u>	ty and address of the person(s) who has/have authority to manage is/are: Name and Address: Name and Address: Name and Address:
(SNEGA) (EUNA	Ruber Kopel
·····	GYO FIFT ALL. ZON FI
(Use attachments if necessar	у)
9. Attached is a certificate of invisdiction under the law of	existence, no more than 90 days old, duly authenticated by the official having custody of records in the
of the translator must be subr	which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath nitted)
10. This document is execute	
rubonitad in a daguaran as ab	d in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information
submitted in a document to th	od in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
submitted in a document to the	be Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
submitted in a document to th	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Signature of an authorized person
submitted in a document to the	ne Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



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

DELAWARE, DO HEREBY CERTIFY "OWL CREEK GP, LLC" IS DULY FORMED

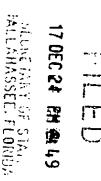
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OWL CREEK GP, LLC" WAS FORMED ON THE SEVENTH DAY OF AUGUST, A.D. 2001.

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





Authentication: 203808910

Date: 12-21-17

3422998 8300 SR# 20177716899

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