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From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (800)345-4647

Fax Number : (800) 432-3622

**Enter the email address for this business entity to be used for future—
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Foreign Limited Liability Company CJ SUBSIDIARY #1, LLC

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K. SALY DEC 22 2017

Tricia W. Maddin

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 POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. CJ Subsidiary #1, LLC [Names of Foreign Limited Liability Company; must include "Limited Liability Company," "L.J. C., or "LJ.C."] (If morre-viewellable, order alternate seems adopted for the purpose of transacting beatiness in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LL.C," €553628 2. Delaware (Fill possible, if applicable) (Jarladictive under the law of which through limited liability company is orga-4890 Alpha Road, Suite 100 4890 Alpha Road, Suite 100 Maline Address (Street Address of Principal Office) Dallas, TX 75244 Dallas, TX 75244 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Capitol Comorate Services, Inc. Name: 515 E Park Ave 2nd FI Office Address: 10- Ejorida 32301 Tailalussee (Ciry) Registèred agent's acceptances 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 liereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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. Kim Tadlock, Asst. Sec. on behalf of Capitol Corporate Services, Inc. 8. The name, title or expacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Name and Address: Title or Canacity: Michele Wheeler Vice President Lewis W. Shaw, II President 4890 Alpha Road, Suite 100 4890 Alpha Road, Sure Dallas, TX 75244 (Use attachments if necessary) 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) 10. 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 8.817.155, F.S.

Typed or printed mans of signer

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CJ SUBSIDIARY #1, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAMARE 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 "CJ SUBSIDIARY #1, LLC" WAS FORMED ON THE EIGHTH DAY OF DECEMBER, A.D. 2017.

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

6653628 8300 SR# 20177719560

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

Authentication: 203810012

Date: 12-21-17