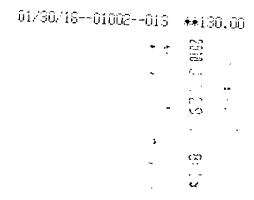
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(Requestor's Name)
(Address)
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J. HARRIS

COVER LETTER

		CO	VERTEILER		
	stration Section				
Divis	sion of Corporation	ns			
SUBJECT:	TSREO, LLC				
SOBJECT.		Name of	Limited Liability (Company	
					nnsact Business in Florida," Certificate o c company to transact business in Florida
Please return	all correspondence	concerning this matter to the	following:		
	Brian Newma	n			
		N	ame of Person		
	Shelving Rock	, LLC			
	· · · · · · · · · · · · · · · · · · ·	F	irm/Company		
	3 Corporate Dr	rive, Ste 208			
			Address		
	Shelton, CT 06	484			
		City/S	tate and Zip Code	•	
	bnewman@shel	_			
		E-mail address: (to be use	d for future annual	report not	ification)
For further inf	formation concerning	ng this matter, please call:			
Bria	n Newman		866 at (598-25	46
	Name o	of Contact Person	Area Code	Day	time Telephone Number
Divis Regi: P.O.	LING ADDRESS: sion of Corporation: stration Section Box 6327 hassee, Fl. 32314			Division Registrati Clifton B 2661 Exc	ADDRESS: of Corporations ion Section uilding secutive Center Circle see, FL 32301
	check for the follow 25.00 Filing Fee	ring amount: ■ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng 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 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. TSREO, LLC (Name of Foreign	Limited Liability Company; must include "Limite	d Liabili	y Company," "L.L.C.," or "L.L.C.,"	-				
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida. The a	alternate name must include "Limited Liz	ibility Company,"	"L.L.C," or "LLC.")			
n Delaware	. , ,		36-4861121					
(Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, if applicable)					
January 1, 2018								
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determine	registratio	n.) Jiability)					
TSREO, LLC			TSREO, LLC					
(Street Address of Principal Office)			(Mailing Address)					
601 Brickell Key Drive	e, Suite 700	601 Brickell Key Drive, Suite 700						
Miami, FL 33131			Miami, FL 33131					
7. Name and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Box CT Corporation System	: <u>NOT</u>	acceptable)		- (-			
Office Address:	1200 South Pine Island Road				ub. F			
Office Address;					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Plantation (City)		, Florida 33324		L3 ·			
	s of my position as registered agent. Ca andw mater C (Registered agent's	T CO1	rporation System					
8. The name, title or cap; Title or Capacity:	acity and address of the person(s) who ha	as/have		<u>Name ar</u>	<u>ıd Address:</u>			
Manager	Brian Newman							
	601 Brickell Key Dr., Ste 700 Miami, FL 33131	<u>-</u>						
(Use attachments if neces	sary)	_						
	of existence, no more than 90 days old, of which it is organized. (If the certificat ubmitted)							
	uted in accordance with section 605.0203 the Department of State constitutes a th							
	Signature	or an auth	onzed person					
	Brian I	Newma	an					

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "TSREO, 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 EIGHTEENTH DAY OF JANUARY, A.D. 2018.

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

Authentication: 201992761

Date: 01-18-18