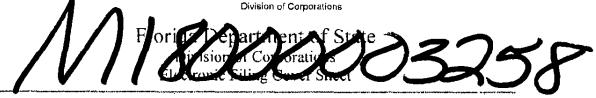
2018-04-04 14:08:33 CST

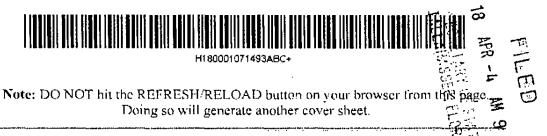
19542080845 From: Ranae McGraw

4/4/2018



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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From:

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Foreign Limited Liability Company LS Integra, LLC

Certificate of Status	0
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING AS SURMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDAS 1 LSIntegra,LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LA.C.," or "LI.C.") (If name unavailable, enter alconate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") (Jurisdienen under the law of which foreign limited liability company is organized) (FEI tamber if applicable) 4/2/2018 999 Waterside Drive, Suite 2300. 999 Waterside Drive, Suite 2300 (Street Address of Principal Office) (Mailing Address) Norfolk, VA 23510 Norfolk, VA 23510 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) **CTCorporationSystem** Name: 1200 SouthPineIslandRoad Office Address: Plantation 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 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. CTCorporationSystem | Kristin Bolden Assistant Secretary 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Titleor Capacity: Name and Address: Titleer Capacity: Name and Address: Manager T.Richard Litton, Jr., Manager off.SIntegraManaging Co., LLC, itsManager 999WatersideDr,Ste2300, Norfolk, VA 23510 (Use attachments if necessary) 9. Attached is accrtificate 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 submittedinadocument to the Department of State constitutes athird degree follow approvided for in s.817.155, F.S. Signature of an authorizedinerson T.RichardLitton,Jr.

Typed or printed name of signer



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1.516

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

DELAWARE, DO HEREBY CERTIFY "LS INTEGRA, 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 SECOND DAY OF APRIL, A.D. 2018.

6826123 8300 SR# 20182301102

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

Jeffrey W. Bidlack, Betreaty of Silar

Authentication: 202431662

Date: 04-02-18