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K. SALY APR 11 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 154418 7185856

AUTHORIZATION

COST LIMIT : (\$ 125.00

ORDER DATE: April 10, 2018

ORDER TIME : 12:13 PM

ORDER NO. : 154418-115

CUSTOMER NO: 7185856

#### FOREIGN FILINGS

NAME: RGN-TAMPA VII, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

## 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 FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 RGN-Tampa VII, LLC (Name of Foreign Limited Liability Company, must metode "Tamted Liability Company," "L.L.C.," or "LLC.") (If name meavailable, enter alternate manne adopted for the purpose of transacting business in Figuida. The alternate name must include "Lisaited Limbilay Company, "LLC." or "(LC.") (FEI mumber, if applicable (Jamediction under the law of which foreign limited liability company is organized) 4. upon registration (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine 15305 Dalias Parkway, Suite 400 (Street Address of Prescipal Office) (Mexime Address Addison, TX 75001 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: , Florida 32301 Tallahassee Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability edimpany at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capucity. 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 Corporation Service Company Janet Budhu, Asst. Vice President (Registered agent's aignature) 8. The name, title or capacity 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 Capacity: **RGN-Holdings**, LLC sole member 15305 Dallas Pkwy, Ste 400 Addison, TX 75001 (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. 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, ‡.S. Signature of an authorized person Michael J. Osburn Typed or printed turns of signer

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# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RGN-TAMPA VII, 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 TENTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RGN-TAMPA VII, LLC" WAS FORMED ON THE SIXTH DAY OF APRIL, A.D. 2018.

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





Authentication: 202482500

Date: 04-10-18

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SR# 20182560831