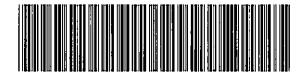
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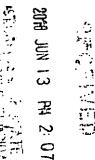
Office Use Only



800312937908



J. HARRIS



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 253909 4302815

AUTHORIZATION

COST LIMIT : \$/125.00

ORDER DATE: June 13, 2018

ORDER TIME : 1:27 PM

ORDER NO. : 253909-010

CUSTOMER NO: 4302815

FOREIGN FILINGS

NAME: BISHOP LAKE WORTH OWNER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | name adopted for the purpose of | transacting business in Flo | orda. The alternate | name must include "Limited Lia | bility Company," "L.L | .C," or "L | l.C.") |
|---|---|---|---|--|--|--|-------------------------|
| 2. DELAWARE | | | 3 | | ber, if applicable) | | _ |
| (Jurisdiction under the law of | which foreign limited liability con | npany is organized) | | (FEI numb | per, if applicable) | | |
| 4. | | | | | _ | | |
| | (Date first transacted bis (See sections 605 0904 & | siness in Florida, if prior to 2.605.0905, F.S. to determ | registration.) nine penalty liability | y) | | * | |
| 5. c/o Apollo - 9 W 57tl | Street, 43rd Floor | | 6. sam | e | | | _ |
| (Street Address o New York, NY 1001 | Principal Office) | | | (Mailing Add | rcss) | | |
| Attn: Tracey Gamble | | | | | 1. | 26:13 | |
| Atai. Tracey Gamble | | | ·=··· | | د ر مو | <u></u> | |
| 7. Name and street addr. | es of Florida registered | dagent: (P.O. Roy | v. NOT accer | stuble) | <u>iπ</u> >- , | | CORVAL ⁷ |
| 7. Name and safet addit | | | x <u>1101</u> accop | : | j. j. | ယ | i |
| Name: | Corporation Service | e Company | | . | | - | |
| Office Address: | 1201 Hays Street | | | | | TET. | |
| | Tallahassee | | | , Florida <u>32301</u> | 10 Ju | &5.5 €26 | |
| , | | | | , 1 101104 | وواسا سسس | | |
| Having been named as designated in this applicated in this applicate to comply with the provi | egistered agent and to ation, I hereby accept sions of all statutes rel ns of my position as re | the uppointment of lative to the proper gistered agent. | as registered | agent and agree to act | in this capacit duties, and I a | y. I fur m famii | ther agree liar with |
| Registered agent's accellaving been named as a designated in this applicate comply with the provious and accept the obligation. 8. The name, title or ca | registered agent and to ution, I hereby accept sions of all statutes rei ns of my position as re Corporation Servic By: | o accept service of the appointment of lative to the proper egistered agent, ce Company (Registered agent's | as registered or and comple stignature) as/have author | agent and agree to act the performance of my ority to manage is/are: | in this capacity duties, and I as Em Asst. V | y. I fur m famil nily C: ice Pi | roft resident |
| Having been named as a designated in this applic to comply with the provi and accept the obligation. 8. The name, title or ca | registered agent and to ation. I hereby accept sions of all statutes rel ns of my position as re Corporation Service By: Doacity and address of the | o accept service of the uppointment of lative to the proper egistered agent, ce Company (Registered agent) the person(s) who haddress: | as registered or and comple stignature) as/have author | agent and agree to act | in this capacity duties, and I as | y. I fur m famil nily C: ice Pi | roft resident |
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| Having been named as a designated in this applic to comply with the provi and accept the obligatio 8. The name, title or ca <u>Title or Capacity:</u> | registered agent and to atton. I hereby accept sions of all statutes reins of my position as recording to a statute and address of the Name and Bishop Sr. Co Apollo New York. | c accept service of the uppointment of lative to the proper egistered agent, ce Company (Registered agent) the person(s) who haddress: Living Holdings | as registered or and comple stignature) as/have author | agent and agree to act the performance of my ority to manage is/are: | in this capacity duties, and I as Em Asst. V | y. I fur m famil nily C: ice Pi | roft resident |

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "BISHOP LAKE WORTH OWNER 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 THIRTEENTH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BISHOP LAKE"

WORTH OWNER LLC" WAS FORMED ON THE SEVENTH DAY OF JUNE, A.D. 2018.

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

Authentication: 202873421

Date: 06-13-18