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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
, ,				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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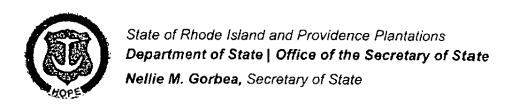
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COVER LETTER

TO: Registration Section Division of Corporation	ns		
SUBJECT: M	DR Realty . LLC	1	
	Name of I	Limited Liability Company	
			ransact Business in Florida," Certificate of ity company to transact business in Florida.
Please return all correspondence	concerning this matter to the	following:	
	Jeanne	St. Germain	
-	Na	ame of Person	
	MOR	Realty, LLC	
	Fi	rm/Company	
	Po Bo	X 91012 Address	
		Address	
	Johns:	TON RT 129 tate and Zip Code	19.
	JSTGERMAIN (6) E-mail address: (to be used	•	
	E-mail address: (to be used	for future annual report n	otification)
For further information concerning	g this matter, please call:		
	<u>St. Germain</u> of Contact Person	at (401) . 3	5 30 - 2 / 39 aytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registra Clifton 2661 E	CT ADDRESS: In of Corporations In action Section Building Recutive Center Circle Research Section Sect
Enclosed is a check for the follow ☐ \$125.00 Filing Fee	ring amount: 13 \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: MDR REALTY, LLC
(Name of Foreign Limited Liability Company," "LLC," or "LLC.") RI REALTY, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") 45-3837521 (FEI number, if applicable) Smi+nfiz.ld 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Michael Grieco Jr. Name: 2001 S Federal HWY Office Address: 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. (Registered agent's nignature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: member MEMber (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 s.817.155, F.S.



CERTIFICATE OF GOOD STANDING

I, Nellie M. Gorbea, Secretary of State and custodian of the seal and corporate records of the State of Rhode Island and Providence Plantations, hereby certify that:

MDR REALTY LLC

is a Rhode Island Limited Liability Company organized on **November 18, 2011.**I further certify that revocation proceedings are not pending; articles of dissolution have not been filed: all annual reports are of record and the company is active and in good standing with this office.

This certificate is not to be considered as a notice of the company's tax status, financial condition or business practices; such information is not available from this office.

STANE OF STA

SIGNED and SEALED on

Tulli U. Kalen

July 12, 2018

Secretary of State

Certificate Number: 18070037370

Verify this Certificate at: http://business.sos.ri.gov/CorpWeb/Certificates/Verify.aspx

Processed by: dantonelli