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## CT Corp.

### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

**Date:** 8/3/2018

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#### **COVER LETTER**

		tion Section of Corporation	15				
SUBJEC		E12, LLC					
Bobbic			Name of	Limited Liability	Company		
						ansact Business in Florida," C y company to transact busines	
Please ret	turn all c	orrespondence c	onceming this matter to the	e following:			
		Michael Y. Lin					
			,	Name of Person			
		Carrington, Col	eman, Sloman & Blumentl	nal, L.L.P.			
			F	irm/Company	_		
		901 Main Street	t, Suite 5500				
				Address			
		Dallas, TX 752	02				
			City/5	State and Zip Code	· <u>·</u>		
	п	nlin@ccsb.com					
	_		E-mail address: (to be use	d for future annual	report not	ification)	
For furthe	er inform	ation concerning	this matter, please call:				
:	Michael	Y. Lin		214 at (	855-35;	25	
		Name of	Contact Person	Area Code	Day	time Telephone Number	
I F	Division Registrat P.O. Box	G ADDRESS: of Corporations ion Section 6327 ee, FL 32314			Division of Registrati Clifton Bi 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclosed		k for the followi 10 Filing Fee	ng amount:  \$130,00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee. Certified Copy	ificate

# 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:

	Limited Liability Company; must include "Limited L	iability Company," "L.L.C.," or "L.L.C."	<del></del>	
(If name unavailable, enter attemate n	name adopted for the purpose of transacting business in Florida	. The alternate name must include "Limited Lia	bility Company," "Li_C," or "LLC,")	
, Texas				
(Jurisdiction under the law of wi	hich foreign limited liability company o organized)	3(FEC num	ber, if applicable)	
4				
	(Date first transacted business in Florida, if prior to regi (See sections 605,0904 & 605,0905, F.S. to determine p	stration ) penalty liability)		
5. 325 N. St. Paul Street		6. 325 N. St. Paul Street		
(Street Address of P Suite 4300	rincipal Office)	Suite 4300	ress)	
Dallas, TX 75201	<del></del>	Dallas, TX 75201		
		<u></u>		
7. Name and street addres	s of Florida registered agent: (P.O. Box N	OT acceptable)		
Name:	CT Corporation System			
	1200 South Pine Island Road			
Office Address:	1200 South File Island Road	<del></del>		
	Plantation	, Florida 33324		
Registered agent's accept	(City)	(Zip cod	c)	
•				
	s of my position as registered agent.  James M. Halpin - (Registered agent's sign	- Assistant Secretary	<del></del>	
8. The name, title or capa Title or Capacity:	Jan M. Halpin -	eture)	Name and Address:	
Title or Canacity:	James M. Halpin - (Registered agent's sign socity and address of the person(s) who has/h Name and Address:	ettre) nave authority to manage is/are:	Name and Address:	
	James M. Halpin - (Registered agent's sign socity and address of the person(s) who has/h Name and Address:  Jean C. Thompson 325 N. St. Paul St., Suite 4300	ettre) nave authority to manage is/are:	N	
Title or Canacity:	James M. Halpin - (Registered agent's sign socity and address of the person(s) who has/h Name and Address:	ettre) nave authority to manage is/are:	229	
Title or Canacity:	James M. Halpin - (Registered agent's sign socity and address of the person(s) who has/h Name and Address:  Jean C. Thompson 325 N. St. Paul St., Suite 4300	ettre) nave authority to manage is/are:		
Title or Canacity:	James M. Halpin - (Registered agent's sign socity and address of the person(s) who has/h Name and Address:  Jean C. Thompson 325 N. St. Paul St., Suite 4300	ettre) nave authority to manage is/are:		
Title or Canacity:	James M. Halpin - (Registered agent's sign socity and address of the person(s) who has/h Name and Address:  Jean C. Thompson 325 N. St. Paul St., Suite 4300	ettre) nave authority to manage is/are:	23 6 -3	
Title or Canacity:	James M. Halpin - (Registered agent's sign socity and address of the person(s) who has/t Name and Address:  Jean C. Thompson  325 N. St. Paul St., Suite 4300 Dallas, TX 75201	ettre) nave authority to manage is/are:	23 6 -3	
Title or Canacity:  Manager  (Use attachments if necess 9. Attached is a certificate	James M. Halpin - (Registered agent's sign acity and address of the person(s) who has/from Name and Address:  Jean C. Thompson  325 N. St. Paul St., Suite 4300  Dallas, TX 75201  sary)  of existence, no more than 90 days old, dul of which it is organized. (If the certificate is	nave authority to manage is/are:  Title or Capacity:	wing custody of records in the	
Title or Canacity:  Manager  (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of the translator must be su 10. This document is execu	James M. Halpin - (Registered agent's sign acity and address of the person(s) who has/from Name and Address:  Jean C. Thompson  325 N. St. Paul St., Suite 4300  Dallas, TX 75201  sary)  of existence, no more than 90 days old, dul of which it is organized. (If the certificate is	have authority to manage is/are:  Title or Canacity:  ly authenticated by the official has in a foreign language, a translat  (b) (b), Florida Statutes, I am awar	twing custody of records in the ion of the certificate under oath	



Rolando B. Pablos Secretary of State

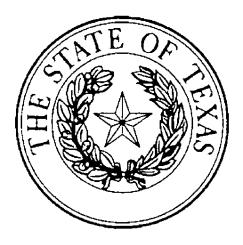
## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CTRE12, LLC (file number 802857663), a Domestic Limited Liability Company (LLC), was filed in this office on November 10, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 03, 2018.



Phone: (512) 463-5555

Prepared by: SOS-WEB

RR

Rolando B. Pablos Secretary of State

TID: 10264 Document: 828893170004