# 11/180000008990

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300319006883



THE BUT -2 TH 4: BY

K. SALY OUT -3 2018

#### FLORIDA FILING & SEARCH SERVICES, INC.

### P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 10-02-18

NAME:

TRG TRINITY MEMBER, LLC

TYPE OF FILING: FOREIGN QUALIFICATION

COST:

160.00

RETURN: CERTIFIED COPY AND GOOD STANDING

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE Chosettal

#### COVER LETTER

TO:

Registration Section

Diy	ision of Corporatio	ns					
SUBJECT:	TRG Trinity Memb	per, LLC					
		Name of	Limited Liability	Company		•	
The enclosed Existence, an	"Application by Fo	reign Limited Liability Comed to register the above reference	pany for Authoriz enced foreign lim	ation to Tr	ansact Business in Florida, ty company to transact busin	Certificate of sess in Florida.	
Please return	all correspondence	concerning this matter to the	following:				
	Kristi Dickisor	ı					
		N	lame of Person				
	Nelson Mullin	s Broad and Cassel					
	Firm/Company						
	390 North Ora	nge Avenue, Suite 1400					
	Address						
	Orlando, Florid	ia 32801					
		City/S	tate and Zip Code	;			
	behant@jdflaw.c	com					
		E-mail address: (to be use	d for future annua	report no	tification)		
For further in	formation concernin	g this matter, please call:					
Kris	sti Dickison		407 at (	481-52 )	63		
	Name o	f Contact Person	Area Code	Day	time Telephone Number		
Divi Regi P.O.	ILING ADDRESS; sion of Corporations stration Section Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301		
	check for the follow 125.00 Filing Fee	ing amount:  \$\Bigsize \text{\$\sum \text{\$\text{\$130.00 Filing Fee & }}\$}\$  Certificate of Status	☐ \$155.00 Filin Certified Copy		☐ \$160.00 Filing Fee, Co of Status & Certified Cop		

## 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:

	LLC Limited Liability Company; must include "Limited Liability Company; must include "Limited Limited Liability Company"; must include "Limited Liability Company"; must include "Liability Company"; must include	ted Liability Company," "L.L.C.," or "LL	.C.")
If name unavailable enter niternate e	ame adopted for the purpose of transacting business in F	The phones were and in 1 to 11 to	16'17' O http://www.
a	and the motivation of the property of the state of the st	locior. The michiese rame must include "Limite	d Liability Company," "LLC," or "LLC.")
Delaware		3	
from predictions manner that is an or w	tich foreign limited hability company is organized)	(PEI	cumber, if applicable)
upon filing			
•	(Date first transacted business in Florida, if oner to	o registration.)	
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 603,0905, F.S. to determ	nine penalty liability)	م بن بر مان المان ال
777 W. Putnam Avenu		6. 777 W. Putnam Avenue	. 25 8
(Street Address of )	rinorpal Office)	(Mailing	Address)
Greenwich, CT 06830		Greenwich, CT 06830	
			<u>्र</u>
<u> </u>		<u></u>	3
Mama and street address	COLUMN TO THE RESIDENCE OF THE PARTY OF THE		
Name and Street addres	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name:	COGENCY GLOBAL INC.		94
. 1001.0.		<del></del>	500
Office Address:	115 NORTH CALHOUN STREET, S	SUITE 4	37-
	T-U-1		
	Tallahassee	, Florida 32301	
egistered agent's accep	(City)	(7 <i>i</i> p	code)
comply with the provisi	ons of all statutes relative to the proper of of my position as registered agent.	is registered agent and agree to i r und complete performance of n	ited llability company at the place act in this capacity. I further agre ny duties, and I am familiar with
comply with the provisi	ons of all statutes relative to the prope	r and complete performance of n OWY Karen McKe	act in this canacity. I further gove
compty with the provising accept the obligations	ons of all statutes relative to the proper to of my position as registered agent.  (Registered agent's  city and address of the person(s) who h	Karen McKed  Spenture)  Market Buthority to manage is/are	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
Title or Canacity:	ons of all statutes relative to the proper of my position as registered agent.  (Registered agent's	r and complete performance of no.  Karen McKer  (gnahare)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary
comply with the provision accept the obligations  The name, title or capa	city and address of the person(s) who h  Name and Address:  Kristin M. Miller	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
comply with the provising accept the obligations  The name, title or capa Title or Capacity:	city and address of the person(s) who hame and Address:  Kristin M. Miller  777 W. Putnam Avenue	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
compty with the provising accept the obligations  The name, title or capa  Title or Capacity:	city and address of the person(s) who h  Name and Address:  Kristin M. Miller	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
comply with the provision accept the obligations  The name, title or capa  Title or Capacity:  MGR	city and address of the person(s) who hame and Address:  Kristin M. Miller  TTT W. Putnam Avenue  Greenwich, CT 06830	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
comply with the provising accept the obligations  The name, title or capa Title or Capacity:	city and address of the person(s) who hame and Address:  Kristin M. Miller  TTT W. Putnam Avenue  Greenwich, CT 06830  Richard P. Richman	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
The name, title or capa  Title or Capacity:	city and address of the person(s) who hame and Address:  Kristin M. Miller  TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman  TTT W. Putnam Avenue	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
The name, title or capa Title or Capacity: MGR	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
The name, title or capa Title or Capacity: MGR	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830	Karen McKed  Spinner  Bignature)  Bignature)	act in this capacity. I further agre ny duties, and I am familiar with own Assistant Secretary o:
The name, title or capa Title or Canacity: MGR  MGR	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830	Karen McKer (Spiniture)  as/have authority to manage is/are Title or Capacity:	act in this capacity. I further agreeny duties, and I am familiar with  own Assistant Secretary  o:  Name and Address:
The name, title or capa Title or Capacity: MGR  MGR  Jse attachments if necess Attached is a certificate	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  ary)  of existence, no more than 90 days old,	(and complete performance of notes of the complete performance of the compl	act in this capacity. I further agreemy duties, and I am familiar with  own Assistant Secretary  o:  Name and Address:
The name, title or capa Title or Canacity: MGR  MGR  Attached is a certificate risdiction under the law of	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  ary)  of existence, no more than 90 days old, of which it is organized. (If the certificat	(and complete performance of notes of the complete performance of the compl	act in this capacity. I further agreemy duties, and I am familiar with  own Assistant Secretary  o:  Name and Address:
The name, title or capa Title or Canacity: MGR  MGR  Attached is a certificate risdiction under the law of the translator must be su	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  ary)  of existence, no more than 90 days old, of which it is organized. (If the certificat bmitted)	Maren McKer (Spinshare)  as/have authority to manage is/are (Title or Capacity;  duly authenticated by the official to is in a foreign language, a trans	act in this capacity. I further agree my duties, and I am familiar with own Assistant Secretary  o:  Name and Address:  having custody of records in the dation of the certificate under oath
The name, title or capa Title or Canacity: MGR  MGR  Attached is a certificate risdiction under the law of the translator must be su  This document is executed.	city and address of the person(s) who hame and Address:  Kristin M. Miller T77 W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman T77 W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman T77 W. Putnam Avenue Greenwich, CT 06830  ary)  of existence, no more than 90 days old, of which it is organized. (If the certificate bmitted)	Maren McKer (Spinshare)  as/have authority to manage is/are (Title or Capacity;  duly authenticated by the official to is in a foreign language, a trans	act in this capacity. I further agree my duties, and I am familiar with own Assistant Secretary  o:  Name and Address:  having custody of records in the dation of the certificate under oath
The name, title or capa Title or Canacity: MGR  MGR  Attached is a certificate risdiction under the law of the translator must be sue. This document is executed.	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  ary)  of existence, no more than 90 days old, of which it is organized. (If the certificate bmitted)  atted in accordance with section 601.020 the Department of State constitutes the	Maren McKer  Karen McKer  ignature)  as/have authority to manage is/are  Title or Capacity;  duly authenticated by the official as is in a foreign language, a trans  (A) (b), Florida Statutes. I am average a trans  (A) (b), Florida Statutes of the control of th	act in this capacity. I further agree my duties, and I am familiar with own Assistant Secretary  o:  Name and Address:  having custody of records in the dation of the certificate under oath
The name, title or capa Title or Canacity: MGR  MGR  Attached is a certificate risdiction under the law of the translator must be su  This document is executed.	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  ary)  of existence, no more than 90 days old, of which it is organized. (If the certificate bmitted)  atted in accordance with section 601.020 the Department of State constitutes the	Maren McKer  Karen	act in this capacity. I further agree my duties, and I am familiar with own Assistant Secretary  o:  Name and Address:  having custody of records in the dation of the certificate under oath
The name, title or capa Title or Canacity: MGR  MGR  Attached is a certificate risdiction under the law of the translator must be su  This document is executed.	city and address of the person(s) who hame and Address:  Kristin M. Miller TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  Richard P. Richman TTT W. Putnam Avenue Greenwich, CT 06830  ary)  of existence, no more than 90 days old, of which it is organized. (If the certificate bmitted)  atted in accordance with section 601.020 the Department of State constitutes the	Maren McKer  Karen McKer  ignature)  as/have authority to manage is/are  Title or Capacity;  duly authenticated by the official as is in a foreign language, a trans  (A) (b), Florida Statutes. I am average a trans  (A) (b), Florida Statutes of the control of th	act in this capacity. I further agree my duties, and I am familiar with own Assistant Secretary  o:  Name and Address:  having custody of records in the dation of the certificate under oath

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TRG TRINITY MEMBER, 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 OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRG TRINITY MEMBER, LLC" WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2018.

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

TALLANASSEE, FLORIDA

Authentication: 203533515

Date: 10-02-18

7081543 8300 SR# 20186942216

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