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

ACCOUNT NO. : I2000000195

REFERENCE : 587580 4803460

AUTHORIZATION :

COST LIMIT

ORDER TIME : 9:36 AM

ORDER DATE: January 16, 2019

ORDER NO. : 587580-005

CUSTOMER NO: 4803460

FOREIGN FILINGS

NAME: NMC HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX 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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

					
	ame adopted for the purpose of transacting business in Flo	nidat The a	tternate name must include "Limited Lial	hility Company," "L L C," or "L	T'C)
2 Delaware (Jurisdiction under the law of which foreign limited liability company is organized)		3.	(FFI much	ocs, if applicable)	_
(Jurishichen dages the law of Wi	ner rotery amile monthly company is organized		(1 6.4 441864	es, ii applicable;	
4	(Pare first transacted business in Florida if more to	revistration			
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	ne penalty			
5. 20807 Biscayne Boule		6.	20807 Biscayne Boulevard		_
Aventura, Florida 3318	•		PO Box 142	ica)	
<u> </u>			Aventura, Florida 33180	221	_
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		- PETPUP	<u></u>	_ ; [
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT:	acceptable)	JANIE	i
Name:	Corporation Service Company			1000	
Office Address:	1201 Hays Street			T T	じ
Office Address.	T-11.1.		22201	5 10: 24	
	Tallahassee (City)		Florida 32301 (Zip cod	2 <u></u>	
ana accept the obligation.	corporation as registered agent. Corporation Service Company By: (Repigral agent)		mplete performance of my Emily Crof Asst. Vice Presi	ì	nai wiii
8. The name, title or capa	Corporation Service Company By: (Repistered agent's acity and address of the person(s) who have	signiture)	Emily Crof Asst. Vice Pres authority to manage is/are:	t ident	
8. The name, title or capa <u>Title or Capacity:</u>	Corporation Service Company By: (Redistered agent's acity and address of the person(s) who have and Address:	signiture)	Emily Crof Asst. Vice Pres	ì	
8. The name, title or capa	Corporation Service Company By: (Redistered agent's acity and address of the person(s) who have and Address: Andrew Shechtel	sign(fut) as/Have	Emily Crof Asst. Vice Pres authority to manage is/are:	t ident	
8. The name, title or capa <u>Title or Capacity:</u>	Corporation Service Company By: (Redistered agent's acity and address of the person(s) who have and Address:	sign(fut) as/Have	Emily Crof Asst. Vice Pres authority to manage is/are:	t ident	
8. The name, title or capa <u>Title or Capacity:</u>	Corporation Service Company By: (Redistered agent's acity and address of the person(s) who has Name and Address: Andrew Shechtel 20807 Biscayne Blvd, Ste 100	sign(fut) as/Have	Emily Crof Asst. Vice Pres authority to manage is/are:	t ident	
8. The name, title or caps Title or Capacity: Manager	Corporation Service Company By: (Repistered agent's acity and address of the person(s) who has Name and Address: Andrew Shechtel 20807 Biscayne Blvd, Ste 100 Aventura, Florida 33180	sign(fut) as/Have	Emily Crof Asst. Vice Pres authority to manage is/are:	t ident	
8. The name, title or capa <u>Title or Capacity:</u>	Corporation Service Company By: (Repistered agent's acity and address of the person(s) who has Name and Address: Andrew Shechtel 20807 Biscayne Blvd, Ste 100 Aventura, Florida 33180	sign(fut) as/Have	Emily Crof Asst. Vice Pres authority to manage is/are:	t ident	
8. The name, title or cape Title or Capacity: Manager (Use attachments if neces) 9. Attached is a certificate	Corporation Service Company By: Capistered agent's acity and address of the person(s) who ha Name and Address: Andrew Shechtel 20807 Biscayne Blvd, Ste 100 Aventura, Florida 33180 csary) c of existence, no more than 90 days old, of which it is organized. (If the certificat	signification in the second se	Emily Crof Asst. Vice President Asst. Vice Preside	Name and Address	s:
8. The name, title or cape Title or Capacity: Manager (Use attachments if neces 9. Attached is a certificate jurisdiction under the law of the translator must be s 10. This document is exec	Corporation Service Company By: Capistered agent's acity and address of the person(s) who ha Name and Address: Andrew Shechtel 20807 Biscayne Blvd, Ste 100 Aventura, Florida 33180 csary) c of existence, no more than 90 days old, of which it is organized. (If the certificat	signification in the second se	Emily Crof Asst. Vice President Asst. Vice Preside	Name and Address aving custody of recordion of the certificate under that any false inform	ds in the
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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NMC HOLDINGS, 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 SIXTEENTH DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NMC HOLDINGS, LLC" WAS FORMED ON THE THIRTEENTH DAY OF AUGUST, A.D. 2014.

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

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Authentication: 202087616

Date: 01-16-19