## Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations Fax Number : (850) 617-6383 From: Account Name : TREMAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, Account Number : 076424003301 : (813)223-7474 : (813)227-0435 Phone Fax Number 18-3052/DMO \*\*Enter the email address for this business entity to be use for future annual report mailings. Enter only one email address p Email Address: cgood@crenam.com Foreign Limited Liability Company Hawk Land Member, LLC Certificate of Status 1 Certified Copy 02 Page Count 2019 F.E.C. - 1 \$155.00 Estimated Charge

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 606.0901, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ine waveflable, enter alterente p	sink adopted for the purpose of transacting business in Fl	fortise. The afternate name must include "Limited Liability Company," "L.L.C." or "1	īc n
Delaware	, , , , , , , , , , , , , , , , , , , ,	3. 83-2627502	,
(Auradomina and it the law of w	mech foreign timeted (as like) company is organized)	(FEI number, if applicable)	
2/1/2019			
	(Date first transacted business in Florida, if provide (See semious 605.0904 & 605.0905, F.S. to distorm	o regarization.) unine penalty flability)	
2502 N. Rocky Paint I	_	6. 2502 N. Rocky Point Drive	
(Street Address of F Suite 105B	Principal (Option)	(Mailing Address) Suite 1050	_
Temps, Florida 33607		Tampo, Florida 33607	-
	S of Florida registered agent: (P.O. Box TK Registered Agent, Inc.	x NOT acceptable)	
Name:			
Office Address:	101 E. Kennedy Boulevard, Suite 270	<del></del>	
	Tampa	, Florida 33602 (Zip acks)	
istered agent's accep	(Cby)	(Zip code)	
omply with the provisi accept the obligations	ons of all statutes relative to the proper of my position as registered agent.	as registered agent and agree to act in this capacity. I fur r and complete performance of my duties, and I am famil	ther a lar w
omply with the provisi   accept the obligation:	ons of all statutes relative to the proper	r and complete performance of my duties, and I am famili	ther a lar wi
accept the obligations	ons of all statutes relative to the proper of my position as registered agent.  (Reginered agent's	r and complete performance of my duties, and I am famili	ther a
accept the obligations	ons of all statutes relative to the proper of my position as registered agent.	r and complete performance of my duties, and I am famili	lar wi
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## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "HAWK LAND 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 FIRST DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HAWK LAND MEMBER, LLC" WAS FORMED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2018.

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

2019 FEB -1 PH 1: 43

Authentication: 202188143

Date: 02-01-19