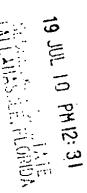
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PICK-UP WAIT MAIL
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 836351 7965870

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : July 9, 2019

ORDER TIME : 9:58 AM

ORDER NO. : 836351-010

CUSTOMER NO: 7965870

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## FOREIGN FILINGS

NAME: 13TH FLOOR WOODLANDS HB GP, 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: Amanda Robinson -- EXT# 62968

EXAMINER:

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABL COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 13th Floor Woodlands				
(Name of For	eign Limited Liability Company;	must include "Limited Lia	bility Company," "L.L.C.," or	TLC.")
-				<u>.</u>
Liability Company," "L.L.C.	Itemate name adopted for the purp " or "LLC.")	pose of transacting busines	ss in Florida. The alternate name	e must include "Limited
2. Delaware		3. 82-2011089		
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)	
4				
	(Date first transacted bus (See sections 605.0904 & 6	siness in Florida, if prior to 505.0905, F.S. to determin	o registration.) e penalty liability)	
5. 848 Brickell Avenue,	PH1			- v. 6
Miami, Florida 33131				JUL
<del></del>		of Principal Office)		5 5
6. 848 Brickell Avenue, F	'H1	<u> </u>		70
Miami, Florida 33131				PH 12: 31
	(Mailir	ng Address)		<u> </u>
7. Name and street address	ss of Florida registered agent:	(P.O. Box NOT accept	able)	
Name:	Timothy Sanders		_	
Office Address:	848 Brickell Avenue PH1		-	
	Miami		_, Florida 33131	
	(City)		(Zip code)	
Registered agent's accep	tance: gistered agent and to accept s	ramian of announce for th	a all and agreed the land the kitt	·
designated in this applica	tion, I hereby accept the appo	ervice of process for in intment as registered a	e avove statea timitea tiabili gent and agree to act in this	ty company at the place capacity. I further agre
to complywith the provisi	ons of all statutes relative to ti	he proper and complete	performance of my duties,	and I am familiar with a
accept the obligations of i	my position as registered agen	it.	11/1	
	(Reg	gistered agent's signature)	<i>i</i>	
8. The name, title or capa	city and address of the person	(s) who has/have author	ity to manage is/are:	
Arnaud Karsenti, Manage	· •	.,	,	
848 Brickell Avenue, PH				
Miami, Florida 33131				
<ol> <li>Attached is a certificate jurisdiction under the law of the translator must be st</li> </ol>	of existence, no more than 90 of which it is organized of the abmitted)	days old, duly authentic	rated by the official having or ty language, a translation of t	ustody of records in the the certificate under oath
	Signatu	are of an authorized person	1	
This document is executed submitted in a document to	in accordance with section 60: the Department of State const	5.0203 (1) (b), Florida S itutes a third degree felo	Statutes. I am aware that any sony as provided for in s.817.1	false information 55, F.S.
	Arnaud Karsenti			

Typed or printed name of signee

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

DELAWARE, DO HEREBY CERTIFY "13TH FLOOR WOODLANDS HB GP, 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 NINTH DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "13TH FLOOR WOODLANDS HB GP, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 2017.

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

19 JUL 10 PH 12: 31



6454773 8300

SR# 20195879938

Date: 07-09-19

Authentication: 203182277

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