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DATE: 10/4/19

NAME: THE COLLIER PROPCO LLC

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

#### COVER LETTER

TH	E COLLIER PROPCO LLC				
UBJECT:		Name of Limit	ed Liability C	ompany	
he enclosed "A existence, and cl	pplication by Foreign Limited Lia neck are submitted to register the	bility Company above referenced	for Authorizat foreign limite	tion to Transact Business in Florida," Certified liability company to transact business in F	cate Flor
lease return all	correspondence concerning this n	natter to the follo	wing:		
		JOELLE C	HURIK		
		Name	of Person		
		UNISEAF	RCH, INC.		
		Firm/C	ompany		
	642	0 DOUBLE EAG	GLE DRIVE,	SUITE 307	
		Ad	dress		
		WOODRID	GE. IL 60517	1	
		City/State a	ınd Zip Code		
		abinia@inspii			
			future annual	report notification)	
For further infor	mation concerning this matter, pla	ease call:			
JOELI	E CHURIK	at	844 (	437-3363	
	Name of Contact Person		Area Code	Daytime Telephone Number	
Divisio Registr P.O. B	in of Corporations ation Section ox 6327 assee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301	
Enclos Please	ed is a check for the following am make check payable to: FLORID 25.00 Filing Fee \$130.00	ount: A DEPARTME Filing Fee &		TE Filing Fee & S160.00 Filing Fee. Co	ertif

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

IN COMPLIANCE WITH SECTION 6/15/0902, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Name of Foreign	Limited Liability Company, must include "Limite	d Liability Company," "L.L.C	.," or "LLC.")	<del></del>	
f name sauvailable, enter alternate n.	ame adopted for the purpose of transacting business in Flo	nda. The alternate name must mel-	ude "Limuted Liability Company," "Li	l, C," or "L1C,")	
VIRGINIA	·	3	(Fil number, if applicable)		
(Jurisdiction under the law of wh	nch fereign lainted liability company is organized)		(FI:I number, it applicable)		
·	(Date liret transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	jegistration ( ine penalty liability)			
8000 WESTPARK DRIVE  (Street Address of Principal Office)		8000 WESTPA	ARK DRIVE (Mailing Address)		
SUITE 495		SUITE 495			
MCLEAN, VA 22102		MCLEAN, VA 22102		<u>(7</u>	2018
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)		CRETA	2019 OCT -
Name:	UNISEARCH, INC.				F 3:
Office Address:	155 OFFICE PLAZA DRIVE			STAT	9: 28
	TALLAHASEE	, Florida	32301	TT.	
	(Ciry)		(Zip code)		

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

Joelle Churik, Asst. Searctum

DAVID MCHARG

Typed or printed name of signore

## Commonwealth of Hürgünür



## State Corporation Commission

#### CERTIFICATE OF FACT

## I Certify the Following from the Records of the Commission:

That The Collier Propco LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is September 18, 2019; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: October 4, 2019

Joel H. Peck, Clerk of the Commission