

12/27/2019

Division of Corporations

Florida Department of State

Division of Corporations

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Foreign Limited Liability Company**SCIP 10020, LLC**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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K. SALY

DEC 30 2019

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

IN COMPLIANCE WITH SECTION 605 (602), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SCIP 10020, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605 (904) & 605 (905), F.S. to determine penalty liability)

5. 225 NE Mizner Blvd., Suite 400

(Street Address of Principal Office)

Boca Raton, Florida 33432

6. 225 NE Mizner Blvd., Suite 400

(Mailing Address)

Boca Raton, Florida 33432

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jason Isaacson

Office Address: 225 NE Mizner Blvd., Suite 400

Boca Raton

(City)

Florida 33432

(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.

/s/ Jason Isaacson

(Registered agent's signature)
Jason Isaacson, Registered Agent

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Member

SCIP Industrial Venture, LLC
225 NE Mizner Blvd., # 400
Boca Raton, FL, 33432

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605 (203) (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Jason Isaacson

Typed or printed name of agent

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CLERK OF THE CIRCUIT COURT

Delaware

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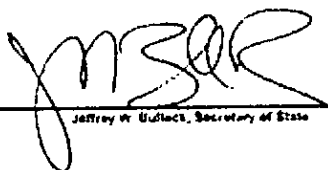
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCIP 10020, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF DECEMBER, A.D. 2019.

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

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DELAWARE SECRETARY OF STATE




Jeffrey W. Bullock, Secretary of State

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