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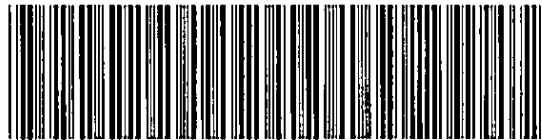
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January 16, 2020

Division of Corporations
Registration Section
PO Box 6327
Tallahassee, FL 32314

RE: Linden Holdings II, LLC

Dear Sir or Madam:


Enclosed are the following:

1. Cover Letter and Application for Certificate of Authority for Linden Holdings II, LLC;
2. Consent to Serve as Florida Registered Agent;
3. Certificate of Existence from the Iowa Secretary of State; and
4. Payment in the amount of \$125.00 for the filing fee.

Please file the enclosed application and return a file-stamped copy in the envelope provided.
Thank you very much.

Sincerely,

BRADLEY & RILEY PC


Kelley R. DeSousa
Paralegal

Enclosures

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FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LINDEN HOLDINGS II, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

KELLEY DESOUSA

Name of Person

C/O BRADLEY & RILEY PC

Firm/Company

2007 1ST AVE SE

Address

CEDAR RAPIDS, IA 52402

City/State and Zip Code

kdesousa@bradleyriley.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KELLEY DESOUSA

Name of Contact Person

319

at ()

Area Code

861-8740

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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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:

1. LINDEN HOLDINGS II, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")

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

3. _____
(FET number, if applicable)

4. 01/01/2020
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 9300 EARHART LANE SW
(Street Address of Principal Office)

6. 9300 EARHART LANE SW
(Mailing Address)

CEDAR RAPIDS, IA 52404 CEDAR RAPIDS, IA 52404

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

Name: PACIFIC REGISTERED AGENTS, INC.

Office Address: 5647 110TH AVE. NORTH

ROYAL PALM BEACH, Florida 33411
(City) (Zip code)

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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)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

Title or Capacity: Name and Address:
☒ Manager Name: CHRISTOPHER D. DEWOLF
☐ Member Address: 9300 EARHART LANE SW
☐ Authorized CEDAR RAPIDS, IA 52404
Person
☐ Other ☐ Other

Title or Capacity: Name and Address:
☒ Manager Name: SUZANNE N. DEWOLF
☐ Member Address: 9300 EARHART LANE SW
☐ Authorized CEDAR RAPIDS, IA 52404
Person
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

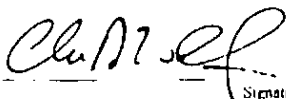
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

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Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 605.0203 (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

CHRISTOPHER D. DEWOLF

Typed or printed name of signer

CONSENT TO SERVE AS FLORIDA REGISTERED AGENT

I, Charles F. Mathias, President of Pacific Registered Agents, Inc., consent to serve as Registered Agent in the State of Florida for **Linden Holdings II, LLC**. I understand it will be our responsibility to accept service of process on behalf of the corporation, to forward mail addressed to the corporation in care of Pacific Registered Agents, Inc., and to immediately notify the Office of the Secretary of State if we resign or change the registered office or business address. Our registered office and business address is:

Pacific Registered Agents, Inc.
5647 110th Ave. North
Royal Palm Beach, FL 33411



Signature of Agent

Title: President
Date: 1/13/2020

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**IOWA SECRETARY OF STATE
PAUL D. PATE**



CERTIFICATE OF EXISTENCE

Issue Date: 1/16/2020

Name: LINDEN HOLDINGS II, LLC (489DLC - 586747)

Date of Incorporation: 11/9/2018

Duration: PERPETUAL

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. The Secretary of State has not administratively dissolved the limited liability company.
- e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

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Certificate ID: CS184849

To validate certificates visit:
sos.iowa.gov/ValidateCertificate

A handwritten signature in black ink, reading "Paul D. Pate".
Paul D. Pate, Iowa Secretary of State