Document Number Only

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Requestor's Name 660 East Jefferson	Street			
Address Tallahassee, FL 32	2301 222-1092	40	0002497874- -04/23/38010590	() <u>1</u> 8
City State Zip	Phone	-	****285.00 ****28	<i>i</i> 5.UU
CORPOR	RATION(S) NAME		DIVIS 9	
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SFI	of Delaw	are, UC	23 AM 9: 20	聖品製
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Acknowledgment	17	21/9/		
W.P. Verifier	7	2016		

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 23, 1998

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: SFI OF DELAWARE, LLC Ref. Number: W98000009115

We have received your document for SFI OF DELAWARE, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The AFFIDAVIT indicates that a total of \$29,800,000.00 in property has been contributed. You must therefore attach a BRIEF description of the property. The description can be VERY BRIEF.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist Letter Number: 898A00022040

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DIVISION DR 23 M 9: 20

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.		SFI of Delawar	ce, LLC	
	(Name of foreign limited liability co "L.C." if not so contained in the na	ompany must end w me at present.)	ith the words "limited company" or the	ir abbreviation
2.	Delaware		3 . 54-1893769	
	(Jurisdiction under the law of which company is organized)	n foreign limited liab		licable)
4.	April 14, 1998	5.	perpetual	200
	(Date of Organization)		ion: Year limited liability company wil erpetual")	I cease to wrist
6.	Willcommence or or about			23 500
	(Date first transacted business in F	Florida. (See sections 60	08.501, 608.502 and 817.155, F.S.)	APR 23 AM 9: 20
7.	3701 E. Virginia Beacl	n Boulevard		9. 毫
	Norfolk, VA 23502	-	•	10 gi
	(Street add	ress of principal offic	ce)	د
	member [MGRM] or manager (attach additional page if necessary) NAME & ADDRESS:	TITLE:	me, title, and business address necessary to list members. NAME & ADDRESS:	TITLE:
<u>1</u>	Chomas B. D'Agostino	Manager	Donald H. Platt	Manager
3	701 E. Virginia Beach Blvd	i.	1440 New York Ave., NW	
N	Jorfolk, VA 23502		Suite 310	
_			Washington, DC 20005	
М	ark D. Director	Manager		
1	440 New York Ave., NW			
	uite 310			-
W		•		

Filing Fee: \$ 52.50 for Application

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

			APR 23
The undersigned m	ember or authorized repr	resentative of a member of	3 ORFO
SFI of Delaw	are, LLC	deposes and says:	9: 20
1) the above named	I limited liability company	has at least two members	0 3
2) the total amount	of cash contributed by th	ne member(s) is \$ 200,000	_ ·
3) if any, the agreed \$ 29,800,000	l value of property other	than cash contributed by member(s he property is attached and made a	s) is part hereto.
4) the total amount \$ 30,000,000	of cash or property antici This total includes ar	ipated to be contributed by member mounts from 2 and 3 above.	r(s) is
		ized representative of a member.	

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Michael B. Feldman, Secretary/Treasurer

Filing Fee: \$52.50 for Affidavit

Florida Qualification of SFI of Delaware, LLC

Description of property:

leasehold interest, contract rights, and other personal and real property necessary for the conduct of the corporation's business

SECRETOR CORPORATIONS
98 MPR 23 MM 9: 20

CERTIFICÀTE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

	SFI of Delaware, LLC	
The na	ame and address of the registered agent and office is:	98 APR 23
	C T CORPORATION SYSTEM	23
	(Name)	3
	c/o C T CORPORATION, 1200 South Pine Island Road,	<u> ဇ</u>
	(P.O. Box <u>not</u> acceptable)	9: 20 -
<u></u>	Plantation, Florida 33324	_
	(City/State/Zip)	_

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T COREORATION SYSTEM

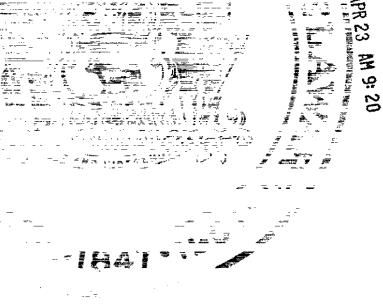
(Signature) (Date)

FILINGFEE: \$35 for Designation of Registered Agent

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SFI OF DELAWARE, 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-FIRST DAY OF APRIL, A.D. 1998.

AND I DO-HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

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