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Account Number : 076424000767
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Email Address: *mvalde@siegfriedrivera.com*

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**FLORIDA LIMITED LIABILITY CO.
1635 HOUSING, LLC**

Certificate of Status	0
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IN WITNESS WHEREOF, the undersigned hereby affirm under the penalties of perjury that the facts stated hereinabove are true and have executed this instrument as of this 8th day of November, 2022.

Brian Marksohn

Brian Marksohn, as authorized
Representative of the members of the
Limited Liability Company

ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

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 as provided for in Chapter.

Dated this 8th of November, 2022.

By: *Brian Marksohn*
Brian Marksohn, Registered Agent

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COUNTY OF
TALLAHASSEE, FLORIDA

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