

M17000008099
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H170002411453))



H170002411453ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (950) 617-6393

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (512) 418-6949
Fax Number : (954) 208-0945

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

2017 SEP 21 PM 5:26
FALL ACHASSIT

Foreign Limited Liability Company
QCRE V, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

2017 SEP -8 PM 1:54
FALL ACHASSIT

Electronic Filing Menu Corporate Filing Menu

Help
SEP 20 2017
J. HARRIS

PLEASE HONOR ORIGINAL DATE 09-08-17

From: send@mail.efax.com
To: [Sickers, Chris](#)
Subject: Successful transmission to 18506176383. Re: QCRE V, LLC
Date: Friday, September 08, 2017 6:50:05 PM

Dear Ranae McGraw,

Re: QCRE V, LLC

The 4 page fax you sent through eFax Solutions to 18506176383 was successfully transmitted at 2017-09-08 22:50:04 (GMT).

The length of transmission was 138 seconds.

The receiving machine's fax ID: 850-617-6381

If you need additional assistance, please visit our online help center at <https://www.efaxcorporate.com/corp/twa/page/customerSupport>. Thank you for using the eFax Solutions service.

Best Regards,

eFax Solutions

Customer Service

Help <https://www.efaxcorporate.com/corp/twa/page/customerSupport>

Tel: 1-323-817-3202

Email: corporate-support@mail.efax.com

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. QGRE V, L.L.C. (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. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)

4. Not applicable. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 101 Central Park West, Suite 1F New York, NY 10023 (Street Address of Principal Office)

6. 101 Central Park West, Suite 1F New York, NY 10023 (Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: C T Corporation System Office Address: 1200 South Pine Island Road Plantation, Florida 33324 (City) (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.

By: C T Corporation System / Chris Rickard (Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Quogue Operations Management, L.L.C, Managing Member 101 Central Park West, Suite 1F New York, NY 10023

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)

Signature of an authorized person

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. Lisa J. Falenski, Authorized Person Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "QCRE V, 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 EIGHTH DAY OF SEPTEMBER, A.D. 2017.

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

Handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

6206188 8300

SR# 20176085136

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203191647

Date: 09-08-17