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Division of Corporations

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Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email	Address	

Foreign Limited Liability Company 3900 Alton Road Venture LLC

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53/29/21

From: Ranae McGraw

DocuSign Envelope ID: B3FFA913-812C-46D4-98E0-13C8E0D106F9

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANYIOTRANS ACTIOUS IN ESPATHIST ATTORIOA:

ft name unavailable, enter alternate i	name adopted for the purpose of transacting baseness in Flo	wida The	alternate name must include "Limited Liability Compa-	ny:: "1.1.0;" or "1.1 0.
Delaware				
Causaly from under the law of w	high foreign limited liability company is organized)	3.	(I th number, it applicable	6)
ŧ				
	(Date first transacted bittings in Florida at provito- (See sections 605 0004 & 605,2705, F.S. to determine	ne bengtiv	iabilis i	
e/o Rockpoint Group L.L.C.			2601 S. Bayshore Drive	
5 Street Address of Principal Office)		Ü.	(Mailing Andress)	
3953 Woodlawn Hall 8	3953 Woodlawn Hall at Old Parkland Suite 850		Suite 850	·
Dallas, TX 75219	as, TX 75219 Miami, FL 33133		Miami, FL 33133	<u> </u>
7. Name and <u>street addres</u>	3 of Florida registered agent; (P.O. Box	NOT 2	acceptable)	
				1
Name:	C T Corporation System			•
Office Address:	1200 South Pine Island Road			
	Plantation		33324 , Florida(/ap crde)	
	(CiN)		(Zip & de)	

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.

Enc Jensen, Assistant Secretary

(Registered agent's signature)

DocuSign Envelope ID: B3FFA913-812C-46D4-98E0-13C8E0D1C6F9

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:	Title or Capacity:	Name and Address:	
□Manager	Name: RP 3900 Alton Road Member LLC	□Manager	Name: M-3900 Alton Associates, LLC	
■ Member	Address: Woodlawn Hall at Old Parkland	■Member	Address:	
□ Authorized	3953 Maple Avenue, Stc. 300	Authorized	Suite 850	
Person	Dallas, TX 75219	Person	Miami, FL 33133	
COther]Other	Other	
□Manager	Name:	□Manager	Name:	
□ Member	Address:	∃Member	Address:	
□ Authorized		Authorized		
Person		Person		
□ Other	Other]Other		
□Manager	Name:	□ Manager	Name:	
□Member	Address:	□ Member	Address:	
⊂ Authorized		Authorized	· · · · · · · · · · · · · · · · · · ·	
Person		Person		
COther	Other	□Other	_Other	

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 filling 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 baving 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. Lam 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.

Pocusioned by:		
COST/EFGADAGAST	Signature of an authorized person	
Camilo Miguel, Jr.		
	Typed or printed name of Signee	





Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "3900 ALTON ROAD VENTURE 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-SEVENTH DAY OF MAY, A.D. 2021.

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

Authentication: 203308441

Date: 05-27-21