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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. LV PHASE I, LLC					
(Name of Foreign	Limited Liability Company; must include "Limite	zd Liabilit	y Company,' "L L.C.," or "LLC.")		
(If name unavailable, enter alternate	name adopted for the purpose of transecting business in F	lorids The	alternate came must include "Limited Liability C	Company," "L.L.C," os "LLC	:.")
DELAWARE 2	which foreign limited liability company is organized)	3.	(FEI number, if ap		
(am significant mades, 0.4 (2m S) A	A high Torough Turnited Hability company is organized)		(FEI number, if app	plicable)	
4	(Date but terrented by any Time	_			
	(Date first transacted bibliness in Florids, if prior to (See sections 605.0904 & 605.0905, F.S. to determi	registration ine panalty	hability)		
4400 BISCAYNE BOULEVARD 5. (Street Aduress of Principal Office)		6.	4400 BISCAYNE BOULEVARD	ı	
		0.	(Mailing Address)		
MIAMI, FLORIDA 33	3137 ———————————————————————————————————		MIAMI, FLORIDA 33137	2022 HAY SEURELL FALLAL	_
				Y 19	Ī
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT.	acceptable)	AM 8: 31	Ţ
Name:	INCORPORATING SERVICES, LTD	·IV	<b>/C.</b>		
Office Address:	1540 GLENWAY DRIVE				
	TALLAHASSEE		32301 , Florida		
	(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.

IsMelissa a. Moreau-Ossistant Secretary

(H220001785853)

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: DA LL TRUST	□Manager	Name: L&M Investor Holdings, LLC
<b>■</b> Member	Address: c/o Cerini & Associates, LLP	<b>≘</b> Member	Address: 8 North Drive
□Authorized	3340 Veterans Memorial Highway	☐.Authorized	Great Neck, New York 11021
Person	Bohemia, New York 11716	Person	
Other	Other	□Other	☐ Other
□Manager	Name: Quay Capital Holdings, LLC	□Manager	Name:
■Member	Address: 2908 Emmons Avenue	□Member	Address:
□Authorized	Brooklyn, New York 11235	$\Box$ Authorized	
Person		Person	
□Other	Other	Other	Other
		·	
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
☐ Authorized		□Authorized	
Person		Person	
□Other	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 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.

Slackex Sleaner

Signature of an authorized person

Alex Kleyner

Typed or printed name of signee

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LV PHASE I, 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 NINETEENTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LV PHASE I, LLC" WAS FORMED ON THE TWELFTH DAY OF MAY, A.D. 2022.

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

6802589 8300 SR# 20222134947

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

Jaffrey W. Bull-SEL Secretary of Same

Authentication: 203472761

Date: 05-19-22

