123 Florda Department of Star 1652 Division of Corporations Electronic Filing Cover Sheet

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To:

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Account Number : 110432003053
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Foreign Limited Liability Company LVPA 9599 NW 87th Avenue OS Owner, LLC

Certificate of Status	1
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Page Count	04
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Corporate Filing Menu

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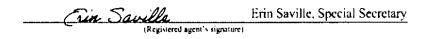
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

	Avenue OS Owner, LLC Limited Liability Company; must include "Limite	d Liability Com	pany," "L.L.C.," or "LLC.")		
name unavailable, enter alternate i	name adopted for the purpose of transacting business in F	kejda. The alterna	te name must include "Limited Liabilit	y Company," "L.L C." or "LLC	
Delaware		3.			
(Jurisdiction under the law of w	urts diction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		
Upon Filing					
	(Date first transacted business in Florida, if prior to 1Sec sections 605 0904 & 605 0905, F.S. to determ	registration) ine penalty liabilit	y)	-	
333 West Wacker Drive, Suite 2300		333 West Wacker Drive, Suite 2300			
rect Address of Principal Office)		6. (Mailing Address)			
Chicago, IL 60606		Chic	rago, IL 60606		
Name and street address	ss of Florida registered agent: (P.O. Box	NOT accep	table)	⊵	
Name:	United Agent Group Inc.		_	2023 JUL 24	
Office Address:	801 US Highway I		_		
	North Palm Beach		33408 Florida	PH 10:17	
	(City)		(Zip code)	17	

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.

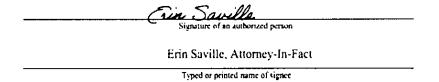


8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address;
□Manager	Name: LVPA OS II Holdings, LLC	□Manager	Name:	
■Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person	Chicago, IL 60606	Person		
□Other	Other	□Other		Other
_				
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□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.





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

DELAWARE, DO HEREBY CERTIFY "LVPA 9599 NW 87TH AVENUE OS OWNER,

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 JULY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LVPA 9599 NW 87TH AVENUE OS OWNER, LLC" WAS FORMED ON THE TWENTIETH DAY OF JULY, A.D. 2023.

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

Authentication: 203803089

Date: 07-21-23