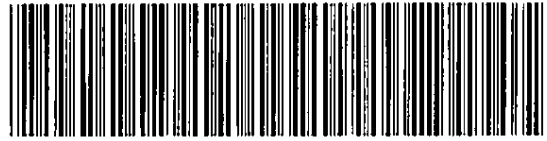


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pike Affordable Housing Group, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Patrick C. Crowell, Attorney
Name of Person
Patrick C. Crowell, P.A.
Firm/Company
3745 Lake Drawdy Drive
Address
Orlando, FL 32820
City/State and Zip Code
pcrowell@patrickcrowell.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Richtmyer at (800) 264-PIKE
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605(902), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Pike Affordable Housing Group, LLC
(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. 93-3315279 (FT) number, if applicable

4. NA (Date first transacted business in Florida, if prior to registration) (See sections 605 (904) & 605 (905), F.S., to determine penalty liability)

5. One Circle Street (Street Address of Principal Office) Rochester, NY 14607 6. One Circle Street (Mailing Address) Rochester, NY 14607

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)

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OFFICE OF THE SECRETARY
STATE OF FLORIDA

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.

Devin Randolph Devin Randolph Assistant Secretary
(Registered agent's signature)

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:
 Manager Name: Pike Construction Services, Inc.
 Member Address: One Circle Street
 Authorized Rochester, NY 14607
 Person _____
 Other _____ Other _____

Title or Capacity: Name and Address:
 Manager Name: Affordable Group Construction, L.
 Member Address: c/o Smith & Henry Advisory Gr
 Authorized 1100 NW 4th Avenue
 Person Delray Beach, FL 33483
 Other _____ Other _____

Manager Name: Thomas F. Judson, Jr.
 Member Address: One Circle Street
 Authorized Rochester, NY 14607
 Person _____
 Other _____ Other _____

Manager Name: Dennis Robinson
 Member Address: 5850 T G Lee Boulevard, Ste. 1
 Authorized Orlando, FL 32822
 Person _____
 Other _____ Other _____

Manager Name: Rufus ^{M.} Judson ^{PCC}
 Member Address: One Circle Street
 Authorized Rochester, NY 14607
 Person _____
 Other _____ Other _____

Manager Name: Matthew Muldoon
 Member Address: 1100 NW 4th Avenue
 Authorized Delray Beach, FL 33483
 Person _____
 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.

Patrick C. Crowell, Attorney
 Signature of an authorized person

Patrick C. Crowell, Attorney

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 "PIKE AFFORDABLE HOUSING GROUP, 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 FIFTH DAY OF OCTOBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PIKE AFFORDABLE HOUSING GROUP, LLC" WAS FORMED ON THE SIXTH DAY OF SEPTEMBER, A.D. 2023.

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



7660338 8300

SR# 20233661446

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

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

Jeffrey W. Bullock Secretary of State

Authentication: 204312770

Date: 10-05-23

Filed with the NYS Department of State on 10/05/2023
Filing Number: 231006001315 DOS ID: 7152034