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W17000089695



11 Fennell Street, Suite 1 | Skaneateles, NY 13152

November 28, 2017

Certified Mail # 70171450000208118818

Return Receipt Requested

Ms. Brittany M. Figueroa Regulatory Specialist II Registration/Qualification Section Florida Department of State PO Box 6327 Tallahassee, FL 32314

Re:

241 Damficare LLC

Ref. Number: W17000089695

Dear Ms. Figueroa:

In response to your letter dated November 9, 2017, enclosed is an original Certificate of Existence from the Delaware Department of State. Unfortunately, Delaware does not use a raised seal on its certificates. The Certificate can be verified on-line. For your convenience, I have included a print out from the Delaware Division of Corporations website showing that the Secretary of Stated of Delaware issued a certificate for 241 Damficare LLC on November 20, 2017. I have also enclosed the receipt showing that we paid for the Certificate.

Please contact me if you have any questions or need additional information.

Best Regards,

Ellen 6. Kulik

2017 DEC -4 AM 7: 45

Office Phone & Email:

Jason Millar

Nick Barnes | 239-659-3823 | nick@50statellc.com Michael Besaw | 315-707-4759 | mike@50statellc.com Ellen Kulik | 315-707-4757 | ellen@50statellc.com

| 315-707-4763 | Jason@50statellc.com

Kelly Ochsner | 315-707-4758|kelly@50statellc.com Kim Rouse | 315-707-7459 | kim@50statellc.com Kristin Tessier | 315-707-4761 | kristin@50statellc.com



November 9, 2017

ELLEN KULIK 11 FENNELL ST, STE 1 SKANEATELES, NY 13152 US

SUBJECT: 241 DAMFICARE LLC Ref. Number: W17000089695

We have received your document for 241 DAMFICARE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

Letter Number: 517A00022748

COVER LETTER

TO:		ration Section n of Corporatio	ns				
SUBJ		1 Damficare LLG					
Name of Limited Liability Company							
The en Exister	nclosed "A	pplication by Fo	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tr ted liabilit	ransact Business in Florida," (by company to transact business	Certificate of ess in Florida
Please	return all	correspondence	concerning this matter to the	following:			
		Ellen Kulik					
			N	ame of Person			
		50 State LLC					
			F	irm/Company			
		11 Fennell Stre	eet, Suite 1				
				Address			
	Skaneateles, NY 13152						
			City/S	state and Zip Code			
		kelly@50statello	c.com				
	•		E-mail address: (to be use	d for future annua	report no	tification)	
For fur	ther infori	mation concernin	g this matter, please call:				
Ellen G. Kulik		315 at (707 - 4	757			
		Name o	of Contact Person	Area Code	Day	ytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
Enclose		eck for the follow .00 Filing Fee	ing amount: \$\Boxed{\Boxes}\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy		☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

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. 241 Damficare LLC (Name of Foreig	n Limited Liability Company; must include "Limit	ted Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in FI	orids. The alternate name must include "Limited Lin	shifts Comment "" I C " or "I [C ")
2 Delaware	mane adopted to the purpose of annihilating business in th	27 2102040	ionity company, 12.12.0, or 12.0.1)
4.	which foreign limited liability company is organized)	J.	ber, if applicable)
		,	, 11,
4	(Date first transacted business in Florida, if prior to	registration \	
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	nine penalty liability)	
5. 11 Fennell Street, Su		6. 11 Fennell Street, Suite 1	
(Street Address of Skaneateles, NY 1315	•	(Mailing Add	ress)
Skalleateles, 141 1511		Skaneateles, NY 13152	
7. Name and street addre	ess of Florida registered agent: (P.O. Bo	x NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahasee	22201	
	(City)	, Florida 32301	
Registered agent's acce		(Zip cod	6)
	Corporation Service Company By: Mi		
	(Registered agent's	signature)	
8. The name, title or cap <u>Title or Capacity:</u>	eacity and address of the person(s) who have and Address:	as/have authority to manage is/are: Title or Capacity:	Name and Address:
Member	Phase 4 Real Estate LLC		
	11 Fennell Street, Suite 1	_	
	Skaneateles, NY 13152	_	
<i>a</i>		_	10.1
(Use attachments if neces	ssary)		
 Attached is a certificate urisdiction under the law of the translator must be s 	e of existence, no more than 90 days old, of which it is organized. (If the certificate submitted)	duly authenticated by the official hate is in a foreign language, a translati	ving custody of records in the ion of the certificate under oath
10. This document is executed in a document to	outed in accordance with section 605.020 of the Department of State constitutes a th	3 (1) (b), Florida Statutes. I am awardird degree felony as provided for in s	e that any false information s.817.155, F.S.
	Signature	of an authorized person	
		•	
	Phase 4 Real Estate LLC, by Peer A. S	oderberg	
	_ 	r printed name of signee	



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

DELAWARE, DO HEREBY CERTIFY "241 DAMFICARE 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 TWENTIETH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "241 DAMFICARE LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2017.



Authentication: 203607809

Date: 11-20-17

6594917 8300

SR# 20177175067