# B17000000261

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OCT '3 1 2017

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 887761 4302216

AUTHORIZATION : /

COST LIMIT : \$(10,00.00

ORDER DATE: October 27, 2017

ORDER TIME : 9:35 AM

ORDER NO. : 887761-010

CUSTOMER NO: 4302216

#### FOREIGN FILINGS

NAME: 2017-2 IH BORROWER LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

#### COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 2017-2 IH Borrower LP			
	ted Partnership or Limited	Liability Limited Partnership	
The enclosed application, certificate of state partnership to transact business in Florida. Please return all correspondence concerning		to register a foreign limited partnership or li	imited liability limited
Willimina Bromer			
Contact Person		_	
Simpson Thacher & Bartlett			
Firm/Company		<del>-</del>	
425 Lexington Avenue			
Address		<del>_</del>	
New York, NY 10017			
City, State and Zip C	lode .	- <del></del>	
willimina.bromer@stblaw.com			ļ
E-mail address: (to be used for future ann	ual report notification)	<del>_</del>	İ
For further information concerning this mat	ter, please call:		
Willimina Bromer	at ( 212	455-3199	
Name of Contact Person		and Daytime Telephone Number	
Enclosed is a check for the following amount	nt:		
S1,000.00 Filing Fees S1,008.75 Filing Fee and S35 Registered Agent Fee) S1,008.75 Filing Fees Status		Filing Fees \$1,061.25 Filing Fee, ed Copy Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AD Registration Sec Division of Cor P. O. Box 6327 Tallahassee, FL	ction porations	

### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. 2017-2 IH Borrower LP		
(Name of Limited Partnership or Limited Acceptable Limited Partnership suffixes: Limited Partner	I Liability Limited Partnership, which must include suffix) urtnership, Limited, L.P., LP, or Ltd. Gixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.	
	partnership or limited liability limited partnership proposes to register to tri Florida: must contain acceptable suffix.	ansact
2. Delaware	3, 08/30/2017	
State or Country of Formation	Date of Formation	
4. Federal Employer Identification Number		
5. Name of Registered Agent for Service of Proces	ss and Florida Street Address:	
Corporation Service Company		
1201 Hays Street		
Tallahassee, FL 32301	_	
of all statutes relative to the proper and complete my position as registered agent. Corporation Se By:	ent and agree to act in this capacity. I further agree to comply with the properties of producies, and I am familiar with and accept the obligation ervice Company  Roxanne Turne ignature of Registered Agent  Asst. Vice President	ns of St
7. Principal Office:	8. Mailing Address:	
c/o Invitation Homes	c/o Invitation Homes	
Co monate in the control of the cont		
1717 Main Street, Ste 2000		-17
		7
1717 Main Street, Ste 2000	1717 Main Street, Ste 2000  Dallas, TX 75201 3	THE
1717 Main Street, Ste 2000 Dallas, TX 75201	1717 Main Street, Ste 2000  Dallas, TX 75201 3	FILED
Dallas, TX 75201  9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing account of the second	Dallas, TX 75201  ded partnership, check box.   ddress of each general partner:	FILED
Dallas, TX 75201  9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing at Name of General Partner:  1717 Main Street, Ste 2000	1717 Main Street, Ste 2000  Dallas, TX 75201  ded partnership, check box.   ddress of each general partner:	
Dallas, TX 75201  9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing ac Name of General Partner:  Street Address:  1717 Main Street, Ste 2000  Dallas, TX 75201	1717 Main Street, Ste 2000   C7   Dallas, TX 75201   30     ded partnership, check box.	
Dallas, TX 75201  9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing as Name of General Partner:  Street Address:  1717 Main Street, Ste 2000  Dallas, TX 75201	1717 Main Street, Ste 2000  Dallas, TX 75201  ded partnership, check box.   ddress of each general partner:	
Dallas, TX 75201  9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing ac Name of General Partner:  Street Address:    1717 Main Street, Ste 2000	1717 Main Street, Ste 2000   1717 Main Street Address of each general partner:   1717 Main Street Address:   1717 Main Street, Steep Address:   1717 Main Street, Ste	
Dallas, TX 75201  9. If limited partnership is a limited liability limit 10. Name, principal office address, and mailing ac Name of General Partner:  Street Address:    1717 Main Street, Ste 2000	1717 Main Street, Ste 2000   1717 Main Street, Ste 2000   1728   1729	

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
il. Effective date, if other than the date of filing:  (Effective date cannot be prior to nor more than 90 days a Note: If the date inserted in this block does not meet the adocument's effective date on the Department of State's recommendation.	ofter the date this document is filed by the Florida Department of State.) pplicable statutory filing requirements, this date will not be listed as the cords.
12. Attached is a certificate of existence duly authenticated Florida Department of State, by the Secretary of State or of the law of which it is organized.	d, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction under
Signed this 19th day of September  Sign	By: Jonathan Olsen Managing Director and Senior Vice President of 2017-2 IH Borrower GP LLC, its general partner
The individual signing this document affirms that the facts submitted in a document to the Department of State constitution.	s stated herein are true and the individual is aware that false information tutes a third degree felony as provided for in s.817.155, F.S.

Page 2 of 2

\$52.50 \$8.75

Filing Fees:

Certified Copy (optional): Certificate of Status (optional): \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fce)

130 KH 9:54

## Delaware

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "2017-2 IH BORROWER LP" 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-FOURTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2017-2 IH BORROWER LP" WAS FORMED ON THE THIRTIETH DAY OF AUGUST, A.D. 2017.

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

6527920 8300

SR# 20176767185

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

Jeffrey W. Bullinch, Secretary of State

Authentication: 203452618

Date: 10-24-17