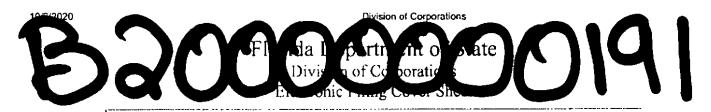
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (514)280-3338 Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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FLORIDA/FOREIGN LP/LLLP

Hometap Investment Partners II, L.P.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50

Electronic Filing Menu Corporate Filing Menu

Help



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

Acceptable Limited Pa	rtnership suffixes: Limited Partnershi	ty Limited Partnership, which must include suffix) p, Limited, L.P., LP, or Ltd. imited Liability Limited Partnership, L.L.L.P. or LLLP.
If name unavailable, to DE	-	hip or limited liability limited partnership proposes to register to transact must contain acceptable suffix.
· 	e or Country of Formation	3. 11/5/2019 Date of Formation
	Identification Number: 84-3608323	
	Agent for Service of Process and F	lorida Street Address:
1200 South Pine Islan	d Road	
Plantation, Florida 333	324	ro
6. I hereby accept the of all statutes relation my position as regis	ve to the proper and complete perform tered agent. By: CTCor	rgree to act in this capacity. I further agree to comply with the provisions cance of my duties, and I am familiar with and accept the obligations of poration System - Peter Trawinski, Assistant Secretary of Registered Agent
1 Detected Office	inguator.	8. Mailing Address:
		800 BOYLSTON ST., 16TH FLOOR
BOSTON, MA - 0219		BOSTON, MA - 02199
Street Address: 800 BOYLSTON ST., 16TH FLOOR		
Mailing Address:		Mailing Address:

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the dat Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	te this document is filed by the Florida Department of State.) tatutory filing requirements, this date will not be listed as the
12. Attached is a certificate of existence duly authenticated, not more Florida Department of State, by the Secretary of State or other officiathe law of which it is organized.	
Signed this 23RD day of SEPTEMBER	.20
Signature of a	- Manager of Hometap Holdings II, LLC, who is the General Partner of Hometap Investment Partners II, L.P. general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50 \$8.75

Certificate of Status (optional):

Page 2 of 2



Page 1

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

DELAWARE, DO HEREBY CERTIFY "HOMETAP INVESTMENT PARTNERS II, L.P."

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-FIFTH DAY OF SEPTEMBER, A.D.

2020.

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

70

7688918 8300

SR# 20207486525

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

Authentication: 203735912

Date: 09-25-20