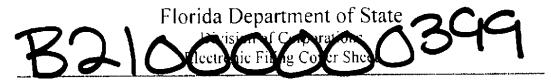
9/10/21, 9:41 AM

Division of Corporations



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(((H210003362983)))



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To:

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Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (614)280-3338 : (954)208-0845

Fax Number

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 SFR XII Orlando Owner 3, L.P.

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September 13, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: SFR XII ORLANDO OWNER 3, L.P.

REF: W21000123468

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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 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.

Tracy L Lemieux Regulatory Specialist II

FAX Aud. #: H21000336298 Letter Number: 021A00022006

From: Kimberly Laughrey

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

(Name of Lie	wher 3, L.P		
Acceptable Limited Pa	artnership suffixes: Limited Partnership, Li	imited Partnership, which must include suffix imited, L.P., LP, or Ltd. rd Liability Lunited Partnership, L.L.L.P. or LL	
If name unavailable,		or limited liability limited partnership proposes st contain acceptable suffix.	to register to transact
2. Delaware		3	
Sta	te or Country of Formation	Date of Formation	
4. Federal Employer	Identification Number: N/A		
5. Name of Registere C T Corporation Syst	ed Agent for Service of Process and Floric em	da Street Address:	
1200 South Pine Islan	nd Road		
Plantation, Florida 33	3324		
6. Thereby accept the of all statutes relating my position as regional.	ive to the proper and complete performance stered agent. By: Katherine Schneider,	r to act in this capacity. I further agree to comp e of my duties, and I am familiar with and accep- tion System Asst. Secretary الطلقاء المخالفات المحالة Registered Agent	ply with the provisions of the obligations of
7. Delected Office	•		. ~
7. Principal Office:		Mailing Address:	2
591 West Puman Av	enue 59	H West Potnam Avenue	
591 West Putnam Av		9) West Putnam Avenue	7. SEP
Greenwich, CT 06830		01 West Putnam Avenue reenwich, CT 96830	1.
Greenwich, CT 06830	n G	reenwich, CT 06830	2021 SEP 10 PH 2
Greenwich, CT 06830 9. If limited partner	Ship is a limited liability limited partners	hip, check box	$\dot{\wp}$
Greenwich, CT 06830 9. If limited partner 10. Name, principal	ship is a limited liability limited partners office address, and mailing address of ea	hip, check box Carter:	2: 52
9. If limited partner 10. Name, principal Name of General	ship is a limited liability limited partners office address, and mailing address of ear Partner. SFR XII Orlando Owner GP, L.J., C	hip, check box	2: 52
9. If limited partner 10. Name, principal Name of General Street Address:	ship is a limited liability limited partners office address, and mailing address of ea Partner. SFR XII Orlando Owner GP, L.L.C	hip, check box	2: 52
9. If limited partner 10. Name, principal Name of General Street Address:	ship is a limited liability limited partners office address, and mailing address of ear Partner. SFR XII Orlando Owner GP, L.L.C S91 West Putnam Avenue Greenwich, CT 06830	hip, check box	2: 52
9. If limited partner 10. Name, principal Name of General Street Address: Mailing Address:	ship is a limited liability limited partners office address, and mailing address of ea Partner. SFR XII Orlando Owner GP, L.L.C 591 West Putnam Avenue Greenwich, CT 06830 591 West Putnam Avenue	hip, check box	2: 52
9. If limited partner 10. Name, principal Name of General Street Address: Mailing Address:	ship is a limited liability limited partners office address, and mailing address of earner. SFR XII Orlando Owner GP, L.L.C S91 West Putnam Avenue Greenwich, CT 06830 S91 West Putnam Avenue Greenwich, CT 06830	hip, check box	2: 52
9. If limited partner 10. Name, principal Name of General Street Address: Mailing Address:	ship is a limited liability limited partners office address, and mailing address of earner. SFR XII Orlando Owner GP, L.L.C S91 West Putnam Avenue Greenwich, CT 06830 S91 West Putnam Avenue Greenwich, CT 06830	hip, check box	2: 52
9. If limited partner 10. Name, principal Name of General Street Address: Mailing Address:	ship is a limited liability limited partners office address, and mailing address of earner. SFR XII Orlando Owner GP, L.L.C S91 West Putnam Avenue Greenwich, CT 06830 S91 West Putnam Avenue Greenwich, CT 06830 Partner.	hip, check box	2: 52

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

\$1,000.00 (\$955 Fifing Fee and \$35 Registered Agent Fee)

Name of General Partner:	Name of General Partner:
Street Address	Street Address.
Mailing Address:	Mailing Address:
	date of filing
	ice duly authenticated, not more than 90 days prior to the delivery of this application to the ecretary of State or other official having custody of the entity's records in the jurisdiction under
Signed this 9th	day of September
	N
	Signature of a general partner

Page 2 of 2

\$52,50

\$8,75

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.



Page 1

From: Kimberly Laughrey

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

DELAWARE, DO HEREBY CERTIFY "SFR XII ORLANDO OWNER 3, 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 NINTH DAY OF SEPTEMBER, A.D. 2021.

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

Authentication: 204121479

Date: 09-09-21