7/1/22, 11:25 AM Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

\*\*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 FKH SFR L, L.P.

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Page Count	04
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Help

S. ROBERTS

JUL 0 1 2022

From, Lexus Wingo

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

FKH SFR L, L.P.					
Acceptable Limited I	Partnership suffixes: Limited Partnership	y Limited Partnership, which must include o, Limited, L.P., LP, or Ltd. mited Liability Limited Partnership, L.L.L.P.			
If name unavailable		ip or limited liability limited partnership propulate contain acceptable suffix.	ooses to reg	ister to	transact
DELAWARE		3. 04/06/2022			
	ate or Country of Formation	Date of Formation			
4. Federal Employe	r Identification Number: 88-1715893				
	red Agent for Service of Process and Fl	orida Street Address:			
C T Corporation Sys	stem				
1200 South Pine Isla	and Road				
Plantation, Florida 3	33324				
<ol> <li>I hereby accept the of all statutes relating my position as reg</li> </ol>	ative to the proper and complete performa gistered agent. By: CT Corp	gree to act in this capacity. I further agree to ance of my duties, and I am familiar with and soration System ames Martin of Registered Agent	comply will accept the	n the pr obligati	ovision ons of
7. Principal Office:		8. Mailing Address:			
•		C/O LEGAL FIRSTKEY HOMES LLC		1022 JUI	
NEW YORK, NY 10022		1850 PARKWAY PLACE 9FL			1 1
		MARIETTA GA 30067	i Ser	-	*:97: * 1
9. If limited partne	ership is a limited liability limited partr	nership, check box.	ć.	PH	; <b>;                                  </b>
10. Name, principa	d office address, and mailing address o CERBERUS SFR HOLDINGS III C	f each general partner: 3P. LLC		<del></del>	محدد ا
Name of Genera		Name of General Partner:			
Street Address:	875 THIRD AVEIOFL NY, NY 10022	Street Address:			
Mailing Address	875 THIRD AVEIOFL NY, NY 10022	Mailing Address:			
Name of Genera	al Partner:	Name of General Partner:			
Street Address:		Street Address:			
Mailing Address		Mailing Address:			
		Page 1 of 2			

Name of General Partner		Name of General Par	rtner:		
Street Address:		Street Address:			
Mailing Address:		Mailing Address:			
Note: If the date inserted in t	han the date of filing:	he date this document is file able statutory filing requires	ed by the Florida Department of State.) ments, this date will not be listed as the		
12. Attached is a certificate of Florida Department of State, the law of which it is organized	by the Secretary of State or other of	more than 90 days prior to official having custody of th	the delivery of this application to the the entity's records in the unisdiction under		
Signed this 28	day of	.20			
	Ī	Man Tose	~~		
Signature of a 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 Certificate of Status (optional): \$8.75

Page 2 of 2



Page 1

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

DELAWARE, DO HEREBY CERTIFY "FKH SFR L, 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 THIRTIETH DAY OF JUNE, A.D. 2022.

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

Authentication: 203816629

Date: 06-30-22

To: