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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name	: BUSINESS FILINGS
Account Number	: 105256001620
Phone	: (608)827-5300
Fax Number	: (608)827-5501

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Email Address: kwcinbcrg@homgroup.com



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Help

Fax Audit # H23000227722.3

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

## IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

EQTY Real Estate, Inc.

(Enter name of corporation: must include "INCORPORATED," "COMPANY." "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.")

California	87-4587618 (FEI number, if applicable)		
(State or country under the law of which it is incorporated)			
1/18/2022	Perpetual		
(Date of incorporation)	(Date of duration, if other than perpetual)		
Upon qualification			
	s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		
1100 Newport Beach, STE 110 Newport Beach, California	ia 92660		
, ten por menen, or the ten por trenent entrement			
-	office <u>street</u> address)		
-			
(Principal o			
(Principal o	office <u>street</u> address)		
(Principal o (Current ma	office <u>street</u> address) iling address. if different)		
(Principal o	office <u>street</u> address) iling address. if different)		
(Principal o (Current ma Name and <u>street address</u> of Florida registered agent: (1 Business Filings Incorporated	office <u>street</u> address) iling address. if different)		
(Principal o (Current ma Name and <u>street address</u> of Florida registered agent: (1 Name:	office <u>street</u> address) iling address. if different)		

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

All from

(Registered agent's signature) Chris Das, AVP, Business Filings Incorporated

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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A. DIRECTORS			
DChairman	Name: Karen Weinberg	Chainnan	Name: Michael Shapiro
⊡Vice Chainman	Address:	∐Vice Chainnan	Address:
Z Director	1100 Newport Beach, STE 110	Director	1100 Newport Beach, STE 110
*President	Newport Beach, California 92660	C President	Newport Beach, California 92660
(XVice President		EVice President	,,,,_,_,_,_,_,_,_,_,_,,_,,,,,,
OSecretary	白 <b>T</b> reassaren	Secretary	🗆 Freastuer
DOther	DO:ber	[]Other	🗋 Other
□Chairman	Name: Tara Shapiro	🗋 Chairman	Name <sup>,</sup>
□Vice Chamman	Address:	⊡Vice Chainnan	Address
<b>Director</b>	1100 Newport Beach, STE 110	Director	·····
Desident	Newport Beach, California 92660	Dresiden	
□Vice President		□Vice President	
🗙 Secretary	CTreasurer	□Secretary	[]Treasurer
	Other	E0ther	
Chainnan	Name.	Chauman	Nanæ
⊡Vice Chainnan	Address:	⊡Vice Chairman	Address:
Director		Director	**************************************
DPresident		President	
⊡Vice President	والمحاولة فالر الرقيق والمراجع والمحاول والمحاول والمحاول والمحاولة ويتقار والمحاولة والمحاولة المحاولة	⊡Vice President	
□Secretary	CIT reasiver	Secretary	Treasurer
Other	Other	DOther	COshei

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form

12.

Signature of Director of Officer

The officer or director signing this document (and who is listed in number 14 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$ \$17,155, F.S.

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13. Karen Weinberg, President

(Typed or printed name and capacity of person signing application)

2023-06-27 12:50:38 CST



## Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: Entity No.: Registration Date: Entity Type: Formed In: Status:

EQTY REAL ESTATE, INC. 4835409 01/18/2022 Stock Corporation - CA - General CALIFORNIA Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of June 27, 2023.

SHIRLEY N. WEBER, PH.D. Secretary of State

Certificate No.: 124232020

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.