11/27/23, 3:44 PM

Division of Corporations

## Florida Department of State

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Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)280-3338

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Email Address: amanda.barajas@marcusmillichap.com

## FOREIGN PROFIT/NONPROFIT CORPORATION

Marcus & Millichap Real Estate Investment Services, Inc.

Certificate of Status	0
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## 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.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  California  3. (State or country under the law of which it is incorporated)  (PEI number, if applicable)  08/26/1976  5. (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  23975 Park Sorrento, Suite 400, Calabasas, CA 91302  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  CT Corporation System  1200 South Pine Island Road  Plantation  F1. 33324  (City)  (City)  Registered agent's acceptance:	California	nume adopted to the		
(State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  23975 Park Sorrento, Suite 400, Calabasas, CA 91302  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  CT Corporation System  1200 South Pine Island Road  Plantation  F1. 33324  (City)  (City)  Registered agent's acceptance:	· · · · · · · · · · · · · · · · · · ·	94.2372547		ousiness in Frontal)
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(Date of incorporation)  (Date of duration, if other than perpetual)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Say 575 Park Sorrento, Suite 400, Calabasas, CA 91302  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  CT Corporation System  1200 South Pine Island Road  Plantation  F1. 33324  (City)  (City)  (Zip code)	` '	α,	(i El nomoci, ii app	readicy
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Registered agent's acceptance:	(City)	<del></del> •	(Zip code)	17
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signated in this application, I hereby accept the appointment as registered agent and agree to act in this capo other agree to comply with the provisions of all statutes relative to the proper and complete performance of n I am familiar with and accept the obligations of my position as registered agent.	lgnated in this application, I hereby accept the app ther agree to comply with the provisions of all stati	pointment as regis utes relative to the	e proper and complete	
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11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total];

under the law of which it is incorporated.

19548277645

i :

A. DIRECTORS						
□ Chairman	Name:	□Chairman	Name:			
□ Vice Chairman	Address: 23975 Park Sorrento, Suite 400	□Vice Chairman	Address:			
Director	Calabasas, CA 91302	□Director				
□President		President				
∐Vice President		□ Vice President				
☐ Secretary	☐Treasurcr	Secretary		☐ Treasurer		
Other CEO	□Other	□Other	<u></u>	□Other		
□Chairman □Vice Chairman □Director	Name: Steven F. DeGennaro  Name: 23975 Park Sorrento, Suite 400  Address: Calabasas, CA 91302	□Chairman □Vice Chairman □Director	Address:			
President		□President	<u>-,</u>			
□Vice President		☐ Vice President				
☐ Secretary	☐ Treasurer	☐ Scoretary		☐Treasurer		
●Other	Other	Other	<del></del>	□Other		
□Chairman □Vice Chairman	Name: Mark Cortell  Address: 23975 Park Sorrento, Suite 400	□Chairman				
Director	Calabasas, CA 91302	Director				
□President		□President				
□ Vice President		□Vice President	<del></del>			
■ Scoretary	□Treasurer	☐ Secretary		☐ Treasurer		
□Other	Other	Other		□Other		
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 filling your Florida Department of State Annual Report form.  12.  Signature of Director or Officer						
The officer or director signing this document (and who is listed in number 11 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 s.817.155, F.S.						
13. Mark Cortel	Secretary  (Typed or printed name and capacity of person	w vigning angliania	n)			
	(Typed or printed name and capacity of perso	ar arkining abbincario	'''			



## Secretary of State Certificate of Status

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

**Entity Name:** 

MARCUS & MILLICHAP REAL ESTATE INVESTMENT SERVICES, INC.

Entity No.:

0777217

Registration Date:

08/26/1976

Entity Type:

Stock Corporation - CA - General

Formed In:

**CALIFORNIA** 

Status:

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 November 20, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 160567218

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.