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| (Requestors Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer |
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| Office Use Only |



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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

| DATE 04/11/2024 | _ | | | ⇔WALK | .]N** |
|--|---------------------------------------|--------------------------|------|-----------------------|------------------------------------|
| ENTITY NAME Home | stead Title and Escrow, Inc | · | | | |
| DOCUMENT NUMBER | | | | | |
| | **PLEASE FILE THE AT | TACHED AND RETURN** | | | |
| xxxxxxxx | Plain Copy | | | | |
| | Certified Copy Certificate of Status | | 629 | 2014 | |
| | **PLEASE OBTAIN THE FOLLOW | VING FOR THE ABOVE ENTIT | 7/** | ц _ф РR III | E LAPAGE |
| | Certified Copy of Arts & A | mendments | | 64 CO | , 1 } к этц Кашей |
| | Certificate of Good Standing | | г | .r. | |
| | **APOSTILLE' / NOTA | RIAL CERTIFICATION** | | | |
| COUNTRY OF DESTINA NUMBER OF CERTIFIC | | | | <u> </u> | |
| TOTAL OWED \$70 | | ACCOUNT #: 12016 | | | |
| Please call Tina at | the above number for any i | | | much! | |

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.

| | orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.") | "COMPANY," "CORPORATI | ON." | |
|--|---|---|---|--|
| | | | | |
| | | | | |
| (If name unavail | able in Florida, enter alternate corporate name ad | lopted for the purpose of transac | ting business in Florida) | |
| Colorado | 3 | | | |
| (State or counti | y under the law of which it is incorporated) | (FEI number, if | applicable) | |
| 09/21/2009 | 5 | | <u> </u> | |
| (Date | of incorporation) | (Date of duration, if other than perpetual) | | |
| | | | | |
| | (Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 | | pility) | |
| 390 Union Blvd | Suite 110, Lakewood, CO 80228 | | | |
| | (Principal office | street address) | | |
| | | | | |
| | | | | |
| | (Current mailing | address, if different) | | |
| | (Current mailing | address, if different) | | |
| Name and street | (Current mailing et address of Florida registered agent: (P.O. | | | |
| Name and stree | | | 47) | |
| Name: | et address of Florida registered agent: (P.O. | | Ø :: :2 | |
| Name: | et address of Florida registered agent: (P.O. Platinum Agent Services LLC 155 Office Plaza Dr. | Box NOT acceptable) | | |
| Name: | et address of Florida registered agent: (P.O. Platinum Agent Services LLC 155 Office Plaza Dr. Tallahassee | Box NOT acceptable) , Florida 32301 | | |
| Name: | et address of Florida registered agent: (P.O. Platinum Agent Services LLC 155 Office Plaza Dr. | Box NOT acceptable) | 2024 APR 11 | |
| Name: ffice Address: Registered ag | et address of Florida registered agent: (P.O. Platinum Agent Services LLC 155 Office Plaza Dr. Tallahassee (City) | Box NOT acceptable) , Florida 32301(Zip code) | 2024 APR 11 A | |
| Name: ffice Address: Registered ag | et address of Florida registered agent: (P.O. Platinum Agent Services LLC 155 Office Plaza Dr. Tallahassee (City) ent's acceptance: ted as registered agent and to accept services | Box NOT acceptable) , Florida 32301, Code) cof process for the above sta | ted corporation at the | |
| Name: ffice Address: Registered ag aving been nan esignated in this | et address of Florida registered agent: (P.O. Platinum Agent Services LLC 155 Office Plaza Dr. Tallahassee (City) | Box NOT acceptable) Florida 32301 (Zip code) to of process for the above statent as registered agent and a | ted corporation at the gree to act in this cape | |
| Name: ffice Address: Registered ag laving been nan esignated in this orther agree to c | et address of Florida registered agent: (P.O. Platinum Agent Services LLC 155 Office Plaza Dr. Tallahassee (City) ent's acceptance: ded as registered agent and to accept services application, I hereby accept the appointme | Box NOT acceptable) , Florida 32301, Code) To of process for the above states the acceptance of agent and agative to the proper and comp | ted corporation at the gree to act in this cape | |
| Name: ffice Address: Registered ag laving been nan esignated in this orther agree to c | Platinum Agent Services LLC 155 Office Plaza Dr. Tallahassee (City) ent's acceptance: red as registered agent and to accept services application, I hereby accept the appointme omply with the provisions of all statutes reli | Box NOT acceptable) , Florida 32301, Code) To of process for the above states the acceptance of agent and agative to the proper and comp | ted corporation at the gree to act in this cape | |
| Name: office Address: Registered ag laving been nan esignated in this orther agree to c | Platinum Agent Services LLC 155 Office Plaza Dr. Tallahassee (City) ent's acceptance: red as registered agent and to accept services application, I hereby accept the appointme omply with the provisions of all statutes reli | Box NOT acceptable) Florida 32301 (Zip code) to of process for the above statest as registered agent and agentive to the proper and compliance as registered agent. | ted corporation at the gree to act in this cape | |

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.

| A. DIRECTORS | | | | | | | | |
|---|---|-----------------------|--|------------------------------|--|--|--|--|
| □Chairman | Name: Tom Gysin | □Chairman | Name: 8480 E Orchard Rd, Suite 4200 Address: | | | | | |
| □Vice Chairman | Address: | □Vice Chairman | | | | | | |
| □Director | Lakewood, CO 80228 | □Director | Greenwood Village, CO 80111 | | | | | |
| ■ President | | □President | | | | | | |
| □Vice President | | ■Vice President | | | | | | |
| ☐ Secretary | ☐Treasurer | □ Secretary | | □Treasurer | | | | |
| Other | Other | □Other | | Other | | | | |
| □Chairman | Mike Rubin | □Chairman | Name: | | | | | |
| □Vice Chairman | Address: 2400 Dallas Parkway | □Vice Chairman | | | | | | |
| Director | Suite 560 | □Director | _ | | | | | |
| □President | Plano, TX 75093 | □President | | | | | | |
| □Vice President | | □Vice President | | | | | | |
| Secretary | Treasurer | ☐ Secretary | | □Treasurer | | | | |
| □Other | Other | □Other | | Other | | | | |
| □Chairman | Name: | □Chairman | Name: | | | | | |
| □Vice Chairman | Address: | □Vice Chairman | Address: | | | | | |
| □Director | | □Director | | | | | | |
| □President | | □President | | | | | | |
| □Vice President | | □Vice President | | | | | | |
| Secretary | ☐ Treasurer | ☐ Secretary | | □Treasurer | | | | |
| □Other | Other | Other | <u> </u> | □Other | | | | |
| Important Notice: individuals may be 12. /s/ Tom Gys | Use an attachment to report more than six (6). The attac added to the index when filing your Florida Departmer in | it of State Annual Re | d for reportin | g purposes only. Non-indexed | | | | |
| 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. | | | | | | | | |
| Tom Gysin - | - President | | | | | | | |

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Homestead Title and Escrow, Inc.

is a

Corporation

formed or registered on 09/21/2009 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20091498016.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/05/2024 that have been posted, and by documents delivered to this office electronically through 04/09/2024 @ 15:28:26.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 04/09/2024 @ 15:28:26 in accordance with applicable law. This certificate is assigned Confirmation Number 15928269



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.coloradosos.gov/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, https://www.coloradosos.gov/click/Businesses, trademarks, trade names" and select "Frequently Asked Questions."