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(((H14000157487 3)))

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HMM.Sanz

Account Name Account Number: I20070000136

: AVILA RODRIGUEZ HERNANDEZ MENA

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Foreign Limited Liability Company EEFC 2312 NMA OWNER, LLC

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July 2, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ANA M SANZ

SUBJECT: BEFC 2312 NMA OWNER, LLC

REF: W14000041007

We have received your document for EEFC 2312 NMA OWNER, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 peartment 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.

Shelia H Young Regulatory Specialist II

FAX Aud. #: H14000157487 Letter Number: 114A00014318

RECEIVED
14 JUL -2 PM 3: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT NO. H14000157487 3

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO

TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 EEFC 2312 NMA OWNER, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") EEFC 2312 NORTH MIAMI AVENUE OWNER, LLC (If name unavailable, enter alternate name adapted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) N/A (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5 c/o East End Capital Partners, LLC 600 Madison Avenue, 11th Floor, New York, NY 100 (Street Address of Principal Office) 6 c/o East End Capital Partners, LLC 600 Madison Avenue, 11th Floor, New York, NY 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Jonathon K. Yormak, Authorized Representative David Peretz, Authorized Representative

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signaruge of an authorized person

(in accordance with section 605,0203, F.S., the execution of this obetiment constitutes an affirmation under the penalties of perjury that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.)

Jonathon K. Yormak

Typed or printed name of signee

FAX AUDIT NO. H14000157487 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

EEFC 2312 NMA OWNER, LLC

If unavailable, the alternate to be used in the state of Florida is:

EEFC 2312 NORTH MIAMI AVENUE OWNER, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company			Z _U	~
	(Name)	*************************************	*	
1201 Hays Street		ý	芸品	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			10 mm	2
Tallahassee	FL 32301			St.
City/State/Zip				رب م

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "EEFC 2312 NMA OWNER, LLC" 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 SECOND DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EEFC 2312 NMA OWNER, LLC" WAS FORMED ON THE NINETEENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5554544 8300

140911945

You may varify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 1504776

DATE: 07-02-14