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SECRETARY OF STATE

". HAMPYO:

COVER LETTER

TO:	Registration Section Division of Corporat	tions						
SUBJE		ATE FUND LLC						
.,		Name of Limited Liability Company						
The end Existen	closed "Application by lace, and check are subm	Foreign Limited Liability Comitted to register the above refe	ipany for Authorization renced foreign limited	on to Tra I liability	nsact Business in Florida," company to transact busir	Certificate of less in Florida		
Please	return all correspondence	ce concerning this matter to the	e following:					
	Jack HORN							
		Ŋ	Name of Person					
	Firm/Company							
	851 NE 69 T	TH ST						
			Address					
	BOCA RAT	ON, FLORIDA 33487						
	City/State and Zip Code							
	wingate20@g	mail.com						
		E-mail address: (to be use	ed for future annual re	eport noti	fication)			
For fur	ther information concern	ning this matter, please call:						
	Jack Horn		at ()	260 435	0			
	Nam	e of Contact Person	Area Code	Day	time Telephone Number			
	MAILING ADDRES Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 3231-	ons	В С 2	Division o Registrati Clifton Bu 2661 Exe	ADDRESS: of Corporations on Section ailding cutive Center Circle ee, FL 32301			
Enclose	ed is a check for the foll \$125.00 Filing Fee		☐ \$155.00 Filing Certified Copy	Fee &	☐ \$160.00 Filing Fee, Co			

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 RESIDENCE. IN THE STATE OF FLORIDA:

. MST REAL ESTATE	USINESS INTHE STATE OF FLORIDA:		
i .		clude "Limited Liability Company," "L.L.C.," or	"LLC.")
	 		
(If name unavailable, enter al Liability Company," "L.L.C,		transacting business in Florida. The alternate na	me must include "Limited
2. DELAWARE		3. 47-1275577	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)
4.			
	(Date first transacted business in (See sections 605.0904 & 605.0905)	n Florida, if prior to registration.) 5, F.S. to determine penalty liability)	_
5. 851 NE 69 TH ST			_
BOCA RATON, FLOR	RIDA 33487		50 5
	(Street Address of Princ	cipal Office)	FE E TI
6. 851 NE 69 TH ST			
BOCA RATON, FLOI	RIDA 33487		SSS
	(Mailing Addr	ress)	mg 3
7. Name and street addres	ss of Florida registered agent: (P.O. E	Box NOT acceptable)	EE. FLOR
Name:	Jack HORN, registered agent	<u> </u>	REFE 3
Office Address:	851 NE 69 TH ST		>
omee madess.	BOCA RATON	, Florida ³³⁴⁸⁷	
	(City)	(Zip code)	_
this application, I hereby with the provisions of all the obligations of my posi	egistered agent and to accept service accept the appointment as registered statutes relative to the proper and colition as registered agent. (Registered	of process for the above stated corporation of agent and agree to act in this capacity. I symplete performance of my duties, and I are agent's signature	further agree to comply
•	acity and address of the person(s) who	o has/have authority to manage is/are:	
Jack Horn, manager			
851 NE 69 TH ST			
BOCA RATON, FLORID	DA 33487		
	of which it is organized. (If the certifiubmitted)	old, duly authenticated by the official having icate is in a foreign language, a translation of the form	
	Signalure of a	n authorized person	
		is document constitutes an affirmation under ation submitted in a document to the Depar	

Typed or printed name of signee

degree felony as provided for in s.817.155, F.S.)

JACK HORN

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "MST REAL ESTATE FUND 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 TWENTY-NINTH DAY OF JUNE, A.D. 2015.

5563695 8300

150987399

AUTHENTICATION: 2513373

DATE: 06-29-15

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