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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| | ACCESS, | | |
|---|--------------|--|-------------|
| | INC. | 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666 | . <i>,</i> |
| | | WALK IN PICK UP: 7/30 Almola | |
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SPECIAL INSTRUCTIONS:

(CORPORATE NAME AND DOCUMENT #)

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COVER LETTER

| TO: | Registration Section Division of Corpor | | | | |
|----------|--|--|---------------------------------------|---|---|
| SUBJE | WK 2010 Real | | | | |
| | · | Name of | Limited Liability Cor | трапу | |
| | | y Foreign Limited Liability Comp mitted to register the above refer | | | |
| Please | return all corresponde | nce concerning this matter to the | following: | | |
| | Jonathan l | Innes | | | |
| | <u> </u> | N | ame of Person | | |
| | Nishad Kh | an P.L. | | | |
| | | Fi | irm/Company | , , , , , , , , , , , , , , , , , , , | |
| | 615 E. Col | onial Drive | | | |
| | | | Address | | |
| | Orlando, F | L 32803 | | | |
| | <u> </u> | City/S | tate and Zip Code | | • |
| | NAK@nish | adkhanlaw.com | | | |
| | | E-mail address: (to be used | d for future annual re | port notification) | |
| For furt | her information conce | erning this matter, please call: | | | |
| | Jon Innes | • | 407 at () | 228-9711 | |
| | Na | me of Contact Person | Area Code | Daytime Telepho | one Number |
| | MAILING ADDRI Division of Corpora Registration Section P.O. Box 6327 Tallahassee, FL 323 | tions | D R C 20 | TREET ADDRESS ivision of Corporation section lifton Building 661 Executive Center allahassee, FL 3230 | ons er Circle |
| Enclose | d is a check for the for the for \$125.00 Filing Fe | | □ \$155,00 Filing I Certified Copy | | Filing Fee, Certificate & Certified Copy |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| | TION 6051992, FLORIDA STATUTES, TE USINESS INTHE STATE OF FLORIDA: | HE FOLLOWING IS SUBM | MITTED TO REGISTER A F | OREGN LIMII | 'ED LIABILI |
|--|---|---|---|------------------------------|-------------|
| 1. | eign Limited Liability Company; must in | nclude "Limited Liability | Company," "L.L.C.," or " | LLC.") | |
| (If name unavailable, enter a Liability Company," "L.L.C, Delaware | Iternate name adopted for the purpose of " or "LLC.") | transacting business in I | Florida. The alternate name | must include " | Limited |
| (Jurisdiction under the law | of which foreign limited liability | 3. | El number, if applicable) | | |
| company is organized) | | | | | |
| 346 Central Avenue | (Date first transacted business in (See sections 605.0904 & 605.090 | n Florida, if prior to regi 05, F.S. to determine pen | stration.) alty liability) | | |
| Brooklyn, NY 11221 | | | | | |
| 346 Central Avenue | (Street Address of Prin | cipal Office) | | | |
| Brooklyn, NY 11221 | | | | | |
| | (Mailing Add | ress) | | | |
| 7. Name and street addres Name: | ss of Florida registered agent: (P.O.) Nishad Khan P.L. | Box <u>NOT</u> acceptable) |) | | |
| Office Address: | 615 E. Colonial Drive | | | 温度 | 1 |
| | Orlando | , F | 32803 lorida | | = |
| Registered agent's accep | (City) | • | (Zip code) | ASS ASS | ٠ 1 |
| Having been named as re this application, I hereby | gistered agent and to accept service accept the appointment as registere statutes relative to the proper and continuous registered agent. | d agent and agree to o | act in this capacity. I fu | ırther agree tö | comply |
| | (Registered | l agent's signature) | | | |
| 8. The name, title or capa Elido Torres, Manager | acity and address of the person(s) wh | o has/have authority to | o manage is/are: | | |
| 346 Central Avenue | | <u>, </u> | | | |
| Brooklyn, NY 11221 | | | | / | |
| | × 1/2 / 5 | ficate is in a foreign la | | | |
| This document is executed submitted in a document to | Signature of a lin accordance with section 605.0200 of the Department of State constitutes Elido Torres | in authorized person 3 (1) (b), Florida Statu a third degree felony a | tes. I am aware that any is provided for in s.817.1 | false informati 55, F.S. | i on |

Typed or printed name of signee

Delaware

PAGE :

The First State

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

DELAWARE, DO HEREBY CERTIFY "WK 2010 REALTY 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 JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WK 2010 REALTY LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2015.

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

5773991 8300

151107584

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 2599030

DATE: 07-29-15

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

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| VK 2010 Realty LLC | reign Limited Liability Company; mu | ıst include | "Limited Liability Company," | "L.L.C.," or | "LLC.") |
|---|--|--|--|---|---|
| ability Company," "L.L.C | alternate name adopted for the purpose," or "LLC.") | se of transa | cting business in Florida. The | alternate nam | ne must include "Limited |
| Delaware | | 3. | 7-4405834 | | |
| Jurisdiction under the lav company is organized) | v of which foreign limited liability | J | (FEI number, | if applicable) | ······································ |
| | (Date first transacted busine | ecc in Flori | do if prior to registration \ | | - |
| 346 Central Avenue | (See sections 605.0904 & 605 | 5.0905, F.S | to determine penalty liability |) | |
| Brooklyn, NY 11221 | | | | | • |
| 346 Central Avenue | (Street Address of | Principal C | ffice) | | • |
| Brooklyn, NY 11221 | 0.7 | | | | · - |
| | (Mailing | Address) | | | 15 15 |
| Name and street addre Name: | ss of Florida registered agent: (P. Nishad Khan P.L. | .O. Box <u>1</u> | NOT acceptable) | | AR L |
| | 615 E. Colonial Drive | | | | - % S S F |
| Office Address: | OTO L. Colonial Dilve | | | | mc » II |
| Office Address: | Orlando | | 3280 Florida |)3 | E E |
| gistered agent's accep | Orlando (City) | | , Florida(2 | Zip code) | II: 02 |
| gistered agent's acceptiving been named as rest application, I hereby the provisions of all | Orlando (City) | tered ager | Florida (2) ocess for the above stated of and agree to act in this c | Zip code) corporation of apacity. I fi | at the place designated in the agree to comply |
| gistered agent's acceptiving been named as rest application, I hereby the provisions of all | Orlando (City) otance: egistered agent and to accept servaccept the appointment as regist statutes relative to the proper an ition as registered agent. | tered ager d complet | Florida (2) ocess for the above stated of and agree to act in this c | Zip code) corporation of apacity. I fi | at the place designated in the agree to comply |
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| gistered agent's acceptiving been named as rest application, I hereby the provisions of all abligations of my post. The name, title or captido Torres, Manager | Orlando (City) otance: egistered agent and to accept servaccept the appointment as regist statutes relative to the proper an ition as registered agent. (Regist | tered ager d completed ered agent' | , Florida (2) cess for the above stated of and agree to act in this ce performance of my duties a signature) | Zip code) corporation of capacity. I fi | at the place designated in the agree to comply |
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| gistered agent's acceptiving been named as rest application, I hereby the the provisions of all a obligations of my postido Torres, Manager 6 Central Avenue ooklyn, NY 11221 Attached is a certificate is diction under the law | Orlando (City) Otance: egistered agent and to accept servaccept the appointment as regists statutes relative to the proper an ition as registered agent. (Registracity and address of the person(s) of existence, no more than 90 day of which it is organized. (If the combinited) | ered agent' who has/l | , Florida (2) ocess for the above stated of and agree to act in this of the performance of my duties as signature) nave authority to manage is a superior to manage is a sup | Zip code) corporation of apacity. I files, and I am /are: | at the place designated in the place designated in the regree to comply familiar with and acceptant and acceptant and acceptant and acceptant acceptant and acceptant |

Typed or printed name of signee

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