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MAY 0 4 2016 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 126712 7836405

AUTHORIZATION :

COST LIMIT : (\$'\125.00

ORDER DATE: May 2, 2016

ORDER TIME : 5:15 PM

ORDER NO. : 126712-005

CUSTOMER NO: 7836405

FOREIGN FILINGS

NAME: INTERNATIONAL MORTGAGE CAPITAL

FUND II, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUMMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Name of Fore	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," (or "ULC.")		
(If name unavailable, enter al Liability Company, "L.L.C.	ternate name adopted for the purpose of transacting business in Florida. The alternate a 'or "LLC.")	ame must include "l	Limited	
2. Delaware	3 47-4487105			
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable	e)		
Has not transacted bus	iness in Florida.			
	(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)			
5. 17201 Biscayne Boule	•			
North Miami Beach, Fl	_ 33160			
	(Street Address of Principal Office)			
6. 17201 Biscayne Bouley	ard		5	
North Miami Beach, Fl	33160	,	MAY W	
	(Mailing Address)		راي ,	
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT acceptable)	r.	1	• 1
Name:	Brian Kopelowitz		6. Fi	
Office Address:	1 West Las Olas Blvd, Fifth Floor		0	.,
	Ft. Lauderdale Florida 33301	• . 	Ψ,	
	(Cuy) (Zip code)			
designated in this applicate to complywith the provision	gistered agent and to accept service of process for the above stated limited lia ion, I hereby accept the appointment as registered agent and agree to act in t ons of all statutes relative to the proper and complete performance of my duti my position as registered agent. By:	this capacity. I fu	irther agr	ree
	(Registered agent's signature)			
8. The name, title or capa	city and address of the person(s) who has/have authority to manage is/are:			
	irector of operations and administration, 405 Lexington Avenue, 59th floor,			
New York, NY 10174.				
Devstar Capital LLC, Opc	rator, 17201 Biscayne Boulevard, North Miann Beach, FL 33160	7141		
9. Attached is a certificate imisdiction under the law of the translator must be sub-	1 19 /	g custody of record of the certificate of	ds in the under out	h
This document is executed submitted in a document to	in accordance with section 605,0203 (1) (b), Florida Statutes 1 am aware that a the Department of State constitutes a third degree felony as provided for in s.81	ny false informati (7.155, F.S.	เก	
	ANTHON T. BIPUS Typed or printed name of signee			

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "INTERNATIONAL MORTGAGE CAPITAL FUND

II, 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 MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INTERNATIONAL MORTGAGE CAPITAL FUND II, LLC" WAS FORMED ON THE FIFTEENTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

THE STATE OF THE S

Authentication: 202245655

Date: 05-02-16

5937544 8300 SR# 20162737639