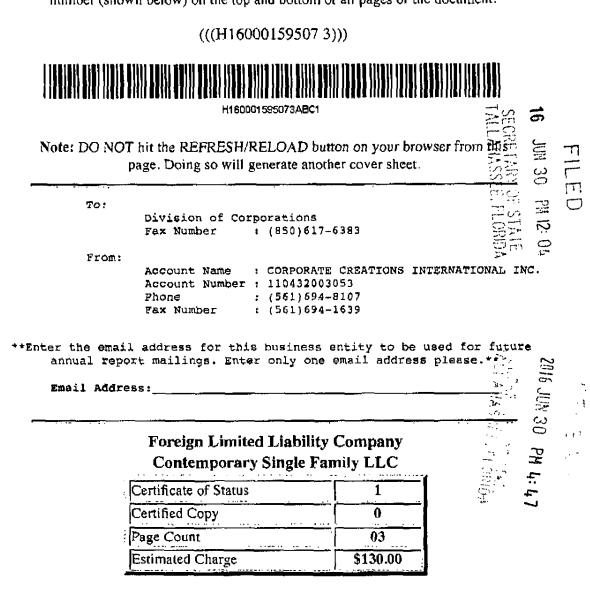
Division of Corporations

https://cfile.sunbiz.org/scripts/cfileovr.exe

## Florida Department of State Liza Color Conformation Florida Uta V Sleet 275

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.



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

IN COMPILANCE WITH SECTION 603,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Contemporary Single Family LLC (Name of Foreign Limited Liability Company: must include "Limited Liability Company," 'L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine panalty liability) 18305 Biscayne Blvd St 402 Aventura, FL 33160 (Street Address of Principal Office) 18305 Biscayne Blvd St 402 Aventura, FL 33160 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporate Creations Network Inc. Name: 11380 Prosperity Farms Road #221E Office Address: Palm Beach Gardens , Florida 33410 Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes clative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position dy registered agent. Timothy Pratts, Special Secretary (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Jacques Bessoudo, Manager 18305 Biscayne Blvd St 402 Aventura, FL 33160 Jordan Kavana, Manager 18305 Biscayne Blvd St 402 Aventura, FL 33160 9. Attached is a 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's organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submigred Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Jacques Bessoudo, Manager by Tim Pratts, Attorney-in-Fact

Typed or printed name of signed

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CONTEMPORARY SINGLE FAMILY 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 THIRTIETH DAY OF JUNE, A.D. 2016.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6082598 8300 SR# 20164710859

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

MSIC

Authentication: 202590387

Date: 06-30-16