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Certified Copies	_ Certificates	s of Status					
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September 23, 2016

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 10174522 SO

Customer Reference 1: 150400-18

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Home SFR Borrower, LLC (DE) Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. CTCOP

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

TO:		stration Section ion of Corporatio	ns	•					
SUBJE		HOME SFR Borro	ver, LLC			_	_		
			Name of	Limited Liability	Company		_		
The end Existen	closed ' ce, and	'Application by Fo	reign Limited Lisbility Com ed to register the above refer	pany for Authoriza renced foreign limi	ation to Tre ted liabilit	ensact Business in Florida, y company to transact busi	" Certificate of ness in Florida		
Please r	oturn s	il correspondence	concoming this matter to the	following:					
		Leigh Taylor					_		
	Name of Person								
	HOME SFR Borrower, LLC								
Firm/Company									
	5001 Plaza on the Lake								
		\ <u></u>		Address					
	Austin, TX 78746								
			City/S	tate and Zip Code					
		ltaylor@amhors	noon						
			B-mail address: (to be use	d for future annual	report not	fication)	-		
For furt	her infi	ormation concernin	g this matter, please call:						
		·		at (.		_		
		Name o	f Contact Person	Area Code	Day	time Telephone Number			
MAILING ADDRESS; Division of Corporations Registration Section P.O. Box 6327 Tallahasses, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahasace, FL 32301						
Enclose		heck for the follow	ing amount:						
	□ \$12	15.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co			

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

IN COMPLIANCE WITH SECTION 605.0902, PLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO RECEIVER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: HOME SFR Bostower, LLC (Name of Foreign Limited Liability Company; must include 'Limited Liability Company," "L.L.C.," or "LLC.") (If nome 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.") 2. Delaware 81-3829189 (Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable) upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 5001 Plaza on the Lake Austin, TX 78746 (Street Address of Principal Office) 5001 Plaza on the Lake Austin, TX 78746 (Mailing Address) 7. Name and street address of Fiorida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. C T Corporation System (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: HOME SFR Equity Owner, LLC Member 5001 Plaza on the Lake, Austin, TX 78746 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 is organized. (If the cortificate is in a foreign language, a translation of the cortificate under oath of the translator must be submitted) 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 follows as provided for in s.817.155, F.S.

Joseph V. Gatti, Authorized Person on behalf of HOME SFR Equity Owner, LLC

Typed or printed name of signee

Member

FLOST - 9/10/2015 Wellers Klawer Online

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "HOME SFR BORROWER, 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-THIRD DAY OF SEPTEMBER, A.D. 2016.

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

Authentication: 203047673

Date: 09-23-16

6143360 8300 SR# 20165917832

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