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COVER LETTER

TO:		tion Section of Corporations	3							
SUBJE		AI Properties, LL								
			Name of Li	imited Liability C	Company					
			ign Limited Liability Compa to register the above referen							
Please i	return all c	orrespondence co	ncerning this matter to the fo	ollowing:						
		Ruth K. McDon	ald							
Name of Person										
Hathaway & Reynolds, P.A.										
	Firm/Company									
	50 A1A North, Suite108									
				Address						
	Ponte Vedra Beach, FL 32082									
•	City/State and Zip Code									
ruth.mcdonald@pvtitle.com										
			E-mail address: (to be used	for future annual	report noti	fication)				
For fur	ther inform	ation concerning	this matter, please call:							
	Ruth K.	McDonald		904 at (280-557	75				
	<u></u>	Name of	Contact Person	Area Code	Dayı	time Telephone Number				
	Division Registrat P.O. Box	of Corporations ion Section 6327 see, FL 32314			Division of Registration Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section ailding cutive Center Circle ee, FL 32301				
Enclose		ck for the followi 00 Filing Fee	ng amount: ■ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g 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, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ISINESS IN THE STATE OF FLORIDA:	•				
1. T RAI Properties LLC	!		The Comment of the Comment	10.00		
(Name of Fore	ign Limited Liability Company; mus	t include "Limited Liab	ility Company," "L.L.C.," or "L	LC.)		
(If name unavailable, enter all Liability Company,""L.L.C."	ternate name adopted for the purpose 'or "LLC.")	of transacting business	in Florida. The alternate name i	must include "I	Limited	ı
2. New York		3. 81-31 753 08				
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)			
4.	(Date first transacted busines (See sections 605.0904 & 605.0	ss in Florida, if prior to 0905, F.S. to determine	registration.) penalty liability)			
5. 500 North Broadway, S	Suite 240					
Jericho, NY 11753	(Street Address of P	rincipal Office)				
6. 500 North Broadway, S		,,		100 Set		
Jericho, NY 11753	· · · · · · · · · · · · · · · · · · ·				Sig	
Jeneno, NT 11755	(Mailing A	Address)		7	SEP 28	-η
7. Name and street addres	s of Florida registered agent: (P.	O. Box NOT accepta	able)	HSK All	28	
Name:	Hathaway & Reynolds, P.A.		,		A	5
Office Address:	50 A1A North, Suite 108		-		AM 10: 0	
	Ponte Vedra Beach		, Florida 32082	¥m.	S	
	(City)		(Zip code)			
designated in this applicate to complywith the provision	gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the pay position as registered agent.	ment as registered ag	gent and agree to act in this	capacity. I fu	irther	agree
	Y (Registe	ered agent's signature)				
8. The name, title or capa Antonio Raimondo, Mana	acity and address of the person(s)	who has/have author	ity to manage is/are:			
500 North Broadway, Sui	te 240					
Jericho, NY 11753						
	Λ΄	ertificate is in a foreig				
This document is executed submitted in a document to	I in accordance with section 605.0 the Department of State constitu)203 (1) (b), Florida S	Statutes. I am aware that any f	alse informati 55, F.S.	ion	

State of New York Department of State } ss:

I hereby certify, that T RAI PROPERTIES LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/06/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 27th day of September two thousand and sixteen.

Brendan W. Fitzgerald Executive Deputy Secretary of State