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ENCORE HOUSING OPPORTUNITY FUND II GENERAL PARTNER, LLC

1 TOWN CENTER ROAD SUITE 600 BOCA RATON, FLORIDA 33486

February 17, 2017

Division of Corporations
Registration Section
Clifton Building
266 Executive Center Circle
Tallahassee, Florid a 32301

Re: Foreign LLC Application

Enclosed please find the Foreign Entity application and check for Encore Housing Opportunity Fund II General Partner, LLC.

Thank you for your attention to this matter.

Cara Dilion

Authorized Agent

Enclosures

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Encore Housing Opportunity Fund I General Partner, UC Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Name of Person	
Encore Capita MANAGMENT LLC Firm/Company	
Firm/Company	
1 Town Ctr Rd, Ste 600 Address	
Address	
BOCA RATON, FL 33486 City/State and Zip Code	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Cora Difiorie at (S61) 9611312 Name of Contact Person Area Code Daytime Telephone Number	
Name of Contact Person Area Code Daytime Telephone Number	
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
Enclosed is a check for the following amount: \$\B\$\$125.00 \text{Filing Fee} \Backsigma \text{\$\text{\$130.00 Filing Fee & Certificate of Status}} \Backsigma \text{\$\text{\$\text{\$Certified Copy}}} \Backsigma \text{\$\text{\$\text{\$\$160.00 Filing Fee, Certificate of Status & Certified Copy}} \Backsigma \text{\$\text{\$\$Ido.00 Filing Fee, Certificate of Status & Certified Copy}} \Backsigma \text{\$\text{\$\$\$\$\$\$\$\$\$ Certified Copy}} \Backsigma \text{\$\text{\$\$\$\$\$\$\$\$\$\$\$} \Backsigma \text{\$\text{\$\$\$}\$} \Backsigma \text{\$\text{\$\$}\$} \Backsigma \text{\$\text{\$\$\$}\$} \Backsigma \text{\$\$\$\$\$} \Backsigma \text{\$\text{\$\$}\$} \Backsigma \text{\$\text{\$\$}	

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: 1. Encore Housing Opportunity Fund I General Portner LLC.")
(Name of Foreign United 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) 2016 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) Koad (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CORA DiFlore Name: Office Address: 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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: MANAGER MANAGER 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 certificate is a foreign language, a translation of the certificate under oath of the translator must be submitted) nature 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.

Typed or printed name of signee

Page 1

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "ENCORE HOUSING OPPORTUNITY FUND II

GENERAL PARTNER, 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 SEVENTEENTH DAY OF

FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "ENCORE HOUSING OPPORTUNITY FUND II GENERAL PARTNER, LLC" IS A SERIES LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENCORE HOUSING OPPORTUNITY FUND II GENERAL PARTNER, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JULY, A.D. 2012.

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

Authentication: 202057515

Date: 02-17-17