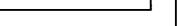
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J. HARRIS

COVER LETTER

TO:

Registration Section
Division of Corporations

BAUER I	PROPERTIES 5, LLC		
	Name of	Limited Liability Company	
The enclosed "Applicat Existence, and check an	ion by Foreign Limited Liability Compe submitted to register the above refer	pany for Authorization to Traced foreign limited liability	ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all corresp	condence concerning this matter to the	following:	
BRA	D SHALIT		
	N	ame of Person	
CON	NELL FOLEY LLP		
	F	irm/Company	· · · · · · · · · · · · · · · · · · ·
85 LI	IVINGSTON AVE.		
		Address	
ROSI	ELAND, NJ 07068		
	City/S	tate and Zip Code	
BSHA	LIT@CONNELLFOLEY.COM		
	E-mail address: (to be used	d for future annual report no	ification)
For further information	concerning this matter, please call:		
BRAD SHAL	IT	973 535-05	00
	Name of Contact Person		time Telephone Number
MAILING AI Division of Co Registration Se P.O. Box 6327 Tallahassee, FI	rporations extion	Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding coutive Center Circle ee, FL 32301
Enclosed is a check for \$125.00 Fili		☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 8, 2017

BRAD SHALIT CONNELL FOLEY LLP 85 LIVINGSTON AVE ROSELAND, NJ 07068

SUBJECT: BAUER PROPERTIES 5, LLC

Ref. Number: W17000039311



We have received your document for BAUER PROPERTIES 5, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 917A00009065

ά'n

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:

	eign Limited Liability Company	y; must include "Limited Lia	bility Company," "L.L.C.," o	r "LLC.")
f noma unavailable, enter a	lternate name adopted for the pi		es in Florido. The alternate no	ma must include (97 imited
iability Company," "L.L.C,		irpose of transacting busines	is in rionda. The alternate ha	me must include. Limited
NEW JERSEY		3,		
(Jurisdiction under the law company is organized)	of which foreign limited liability	iy	(FEI number, if applicable	*)
	(Date first transacted b (See sections 605.0904 &	ousiness in Florida, if prior to 2 605.0905, F.S. to determine	registration.) e penalty liability)	
121 SOUTHVIEW CO				***
BRICK, NJ 08924				
	(Street Addres	ss of Principal Office)		
121 SOUTHVIEW CC	URT			_ Fri 🛢 📆
BRICK, NJ 08924				TALLAHA SECRETA
	(Mai	iling Address)		- SS - 5
Name and street addres	ss of Florida registered agent	: (P.O. Box NOT accept	able)	Encir P
Name:	Douglas L. Rankin, Esq.			PHIZ: 41 OF STATE EFLORIDA
Office Address:	2335 Tamiami Trail North	ı #308		Dm -
	Naples		, Florida 34103	
	(Cit	y)	(Zip code)	
signated in this applica complywith the provisi	rgistered agent and to accept tion, I hereby accept the app ions of all statutes relative to my position as registered ag	pointment as registered a the proper and complete	gent and agree to act in th	is capacity. I further a
		Registered agent's signature)		
	(R			
-	acity and address of the person			
. The name, title or capa ONALD A. PFEIFFER. 21 SOUTHVIEW COU	acity and address of the person, Manager			
ONALD A. PFEIFFER. 21 SOUTHVIEW COU	acity and address of the person, Manager			
ONALD A. PFEIFFER. 21 SOUTHVIEW COURTERICK, NJ 08924 Attached is a certificate	acity and address of the person, Manager RT of existence, no more than 9 of which it is organized. Aft tubmitted)	on(s) who has/have author	cated by the official having	
ONALD A. PFEIFFER. 21 SOUTHVIEW COURICK, NJ 08924 Attached is a certificate risdiction under the law	acity and address of the person, Manager RT of existence, no more than 9 of which it is organized. Aft tubmitted)	on(s) who has/have author	cated by the official having	

Typed or printed name of signee

RONALD A. PFEIFFER

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

BAUER PROPERTIES 5, LLC

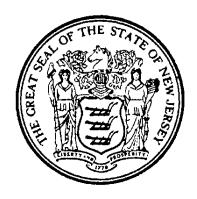
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on February 06, 2013.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2017

I further certify that the registered agent and office are:

BRAD D SHALIT C/O CONNELL FOLEY LLP 85 LIVINGSTON AVENUE ROSELAND, NJ 07068



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 15th day of May, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6079766015

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp