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(R	equestor's Name)	
(Ad	ddress)	
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(Ci	ity/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Be	usiness Entity Name)	
(Di	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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17 AUG 10 AH 9: 10 DIVISION OF CONTORNALIONS

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O SIMMONS -

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 762023 4304394

AUTHORIZATION : Small

COST LIMIT : \$\sqrt{1}60.00

ORDER DATE : August 10, 2017

ORDER TIME : 12:37 PM

ORDER NO. : 762023-100

CUSTOMER NO: 4304394

FOREIGN FILINGS

NAME: OPENDOOR PROPERTY W20 LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

_____ PLAIN STAMPED COPY
XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:

Registration Section Division of Corporations

		Name of I	Limited Liability Co	ompany		
The enclosed Existence, ar	l "Application by For nd check are submitte	eign Limited Liability Comp I to register the above refere	pany for Authorizat enced foreign limite	ion to Tran ed liability o	sact Business in Florida," company to transact busin	Certificate of less in Florida.
Please return	all correspondence c	oncerning this matter to the	following:			
	Erica Navarro					
		N:	ame of Person	······································		
	Mayer Brown I	.L.P				
		Fi	rm/Company	·		
	71 S. Wacker E	Prive				
			Address			
	Chicago, IL 60	606				
		City/S	tate and Zip Code			
	compliancemail@	_				
		E-mail address: (to be used	for future annual:	report notif	ication)	
For further in	nformation concerning	g this matter, please call:				
Eri	ca Navarro		312	701-849		
	Name o	f Contact Person	Area Code	Dayti	ine Telephone Number	
Div Reg P.O	ALING ADDRESS: ision of Corporations sistration Section b. Box 6327 lahassee, FL 32314			Division of Registratio Clifton Bui 2661 Execu		
	a check for the follow \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy		■ \$160.00 Filing Fee, Co of Status & Certified Cop	

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:

	ame adopted for the purpose of transacting business	in Florida. The alternate name must	r include "Limited Liabila;	y Company," "L.L.C," or "LLC.")
Delaware		3		
	men foreign limited liability company is organized)		(FEI number,	it applicable)
Upon filing				
Open ming	(Date first transacted business in Florida, if p	rior to registration)	 	
116 New Montgomery	(See sections 605,0904 & 605,0905, F.S. to c Sr. Suita 820		Iontuomery St. Su	ite 820
(Street Address of)	'nicipal Office)	6. <u>170.70</u>	lontgomery St, Su (Mailing Address	1
San Francisco, CA 941	05	San Francis	co, CA 94105	<u> </u>
				104 6
Name and street address	ss of Florida registered agent: (P.O.	Box NOT acceptable)		9, 0
Name:	Corporation Service Company			§ 4
	1201 H Co			ب الإ
Office Address				
Office Address:	1201 Hays Street			
egistered agent's acceptiving been named as resignated in this application comply with the provise	Tallahassee (Cny) tance: gistered agent and to accept servic- tion, I hereby accept the appointme ions of all statutes relative to the pr s of my position as registered agent	e of process for the abovent as registered agent a coper and complete perfo	nd agree to act in	this capacity. I further a
egistered agent's accep aving been named as re signated in this applica comply with the provisi	Tallahassee (Cny) tance: gistered agent and to accept servication, I hereby accept the appointmetions of all statutes relative to the proposition as registered agent Corporation Service Comby:	e of process for the abovent as registered agent a coper and complete perfo	e stated limited lid nd agree to act in	ability company at the pla this capacity. I further a ties, and I am familiar w
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Typed or printed name of signec-

SIGNATURE PAGE

TO

FOREIGN LLC AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

Date: August 9, 2017

OPENDOOR PROPERTY HOLDCO W LLC.

By: OD Mezzanine Borrower W LLC, its sole Member

By: OpenDoor Labs Inc., its sole Member

Name: Jason Child

Title: Chief Financial Officer





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

DELAWARE, DO HEREBY CERTIFY "OPENDOOR PROPERTY W20 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 TENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OPENDOOR PROPERTY W20 LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JULY, A.D. 2017.

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

Authentication: 203034524

Date: 08-10-17