(S88)0000011

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(Req	uestor's Name)	
(Addı	ress)	
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(City/	/State/Zip/Phone #)	
		_
PICK-UP	WAIT	MAIL
(Busi	iness Entity Name)	
(Doci	ument Number)	
Certified Copies	Certificates of	Status
		
Special Instructions to Fi	ling Officer.	

Office Use Only



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S. WARREN AUG 1 1 2017

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 762023 4304394

AUTHORIZATION : July 8

COST LIMIT : \$(160.00

ORDER DATE: August 10, 2017

ORDER TIME : 12:36 PM

ORDER NO. : 762023-095

CUSTOMER NO: 4304394

FOREIGN FILINGS

NAME: OPENDOOR PROPERTY W19 LLC

XXXX QUALIFICATION (TYPE: LL)

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:

TO:	Registration Section Division of Corporations	
SUBJI	OPENDOOR PROPERTY W19 LLC	
	Name of Limited Liability Company	
The en Exister	closed "Application by Foreign Limited Liability Company for Authorization to Transact Busince, and check are submitted to register the above referenced foreign limited liability company	ness in Florida," Certificate of to transact business in Florida
Please	return all correspondence concerning this matter to the following:	
	Erica Navarro	
	Name of Person	
	Mayer Brown LLP	
	Firm/Company	
	71 S. Wacker Drive	
	Address	
	Chicago, IL 60606	
	City/State and Zip Code	
	compliancemail@cscglobal.com	
	E-mail address: (to be used for future annual report notification)	
For fu	ther information concerning this matter, please call:	
	Erica Navarro 312 701-8492	
	Name of Contact Person Area Code Daytime Telep	hone Number
	MAILING ADDRESS:STREET ADDRESDivision of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive CerTallahassee, FL 323Tallahassee, FL 323	itions i iter Circle
Enclos		00 Filing Fee, Certificate & Certified Copy

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

IN COMPLIANCE WITH SECTION 6/5/0/02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate na	are adopted for the purpose of transacting business in Fl	lorida. The alternate name must include "Limited Liah	oility Company," "L.L.C," or "LLC,")
Delaware		3	
Ourisdiction under the law of wh	uch foreign limited liability company is organized)	(FE) mink	er, if applicable)
Upon filing			
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ	o registration) nine penalty liability)	
116 New Montgomery			Suite 820
116 New Montgomery (Succe Address of P		6. 116 New Montgomery St. 5 (Mailing Addr	cw)
San Francisco, CA 941	05	San Francisco, CA 94105	
			<u> </u>
Name and street addres	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	AUG TO AH
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
Office Address.			는 무
	70 LL L	2224	
aving been named as reg signated in this applical comply with the provisi	gistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relative to the prope tof my position as registered agent. Corporation Service Compa	as registered agent and agree to act r and complete performance of my o	liability company at the place in this capacity. I further agree luties, and I am familiar with Courtney Willie
rsignated in this applicate comply with the provision	tance: gistered agent and to accept service of tion, I hereby accept the appointment o ons of all statutes relative to the prope to of my position as registered agent.	process for the above stated limited as registered agent and agree to act r and complete performance of my o	liability company at the place in this capacity. I further agree duties, and I am familiar with
aving been named as registinated in this application comply with the provision accept the obligations	tance: gistered agent and to accept service of tion, I hereby accept the appointment o ons of all statutes relative to the prope t of my position as registered agent. Corporation Service Compan	process for the above stated limited as registered agent and agree to act r and complete performance of my only sugnature)	liability company at the place in this capacity. I further agree duties, and I am familiar with Courtney Willie
aving been named as resignated in this applicate comply with the provision accept the obligations. The name, title or capa Title or Capacity:	tance: gistered agent and to accept service of tion, I hereby accept the appointment to ons of all statutes relative to the proper of my position as registered agent. Corporation Service Comparation Servic	process for the above stated limited as registered agent and agree to act r and complete performance of my only sygnature.	liability company at the place in this capacity. I further agree duties, and I am familiar with Courtney Willie Asst. Vice Presi
aving been named as resignated in this applicated in this applicate comply with the provision accept the obligations. The name, title or capa Title or Capacity:	tance: gistered agent and to accept service of tion, I hereby accept the appointment of tons of all statutes relative to the prope tof my position as registered agent. Corporation Service Companion By: (Registered agent's city and address of the person(s) who h Name and Address:	process for the above stated limited as registered agent and agree to act r and complete performance of my of the sugnature) ass/have authority to manage is/are: Title or Capacity:	liability company at the place in this capacity. I further agree duties, and I am familiar with Courtney Willie Asst. Vice Presi
aving been named as resignated in this applicate comply with the provision accept the obligations. The name, title or capa Title or Capacity:	tance: gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the proper of my position as registered agent. Corporation Service Companion: (Registered agent's city and address of the person(s) who have and Address: To W LLC 116 New Montgomery St Suite 820	process for the above stated limited as registered agent and agree to act r and complete performance of my of the sugnature) ass/have authority to manage is/are: Title or Capacity:	liability company at the place in this capacity. I further agree duties, and I am familiar with Courtney Willie Asst. Vice Presi
iving been named as resignated in this applicate comply with the provision accept the obligations. The name, title or capa. Title or Capacity:	tance: gistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relative to the proper tof my position as registered agent. Corporation Service Compan By: (Registered agent's city and address of the person(s) who h Name and Address: to W LLC 116 New Montgomery St Suite 820 San Francisco, CA 94105	process for the above stated limited as registered agent and agree to act r and complete performance of my of the sugnature) ass/have authority to manage is/are: Title or Capacity:	liability company at the place in this capacity. I further agree duties, and I am familiar with Courtney Willie Asst. Vice Presi
rving been named as resignated in this applicate comply with the provision of accept the obligations. The name, title or capa Title or Capacity: Opendoor Property Holde Jse attachments if necess Attached is a certificate	tance: gistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relative to the property of my position as registered agent. Corporation Service Companists: (Registered agent's city and address of the person(s) who have and Address: OW LLC 116 New Montgomery St Suite 820 San Francisco, CA 94105 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical	process for the above stated limited as registered agent and agree to act r and complete performance of my only assignature. Title or Capacity: Member duly authenticated by the official ha	liability company at the place in this capacity. I further agree duties, and I am familiar with Courtney Willie Asst. Vice Presi Name and Address:

Typed or printed name of signee

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

17 AUG 10 AN 10: 44

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "OPENDOOR PROPERTY W19 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 W19 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: 203034550

Date: 08-10-17

6481841 8300