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To: Division of Corporations
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Account Number : 075350000132
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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**Foreign Limited Liability Company
Oak Plaza Mezz Loan Agent LLC**

Certificate of Status	1
Certified Copy	1
Page Count	032
Estimated Charge	\$160.00

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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. OAK PLAZA MEZZ LOAN AGENT LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3841 N. E. 2nd Avenue, Suite 400

(Street Address of Principal Office)

Miami, Florida 33137

6. 3841 N. E. 2nd Avenue, Suite 400

(Mailing Address)

Miami, Florida 33137

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Craig Robins

Office Address: 3841 N. E. 2nd Avenue, Suite 400

Miami

(City)

Florida 33137

(Zip code)

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 comply with 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:

Title or Capacity:

Manager

Name and Address:

Craig Robics

3841 NE 2nd Ave., Suite 400
Miami, Florida 33137

Title or Capacity:

Manager

Name and Address:

Steven Gertenstein

3841 NE 2nd Ave., Suite 400
Miami, Florida 33137

Manager

Mathieu Le Bozec

c/o L. Real Estate Advisors France
22, avenue Montaigne
75008 Paris, France

Manager

Alain Hordon

c/o L. Real Estate Advisors France
22, avenue Montaigne
75008 Paris, France

(Use attachments if necessary)

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 in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Signature of an authorized person:

Linda Ebin-Levine

Typed or printed name of signer

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Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OAK PLAZA MEZZ LOAN AGENT 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 SEVENTH DAY OF DECEMBER, A.D. 2017.

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

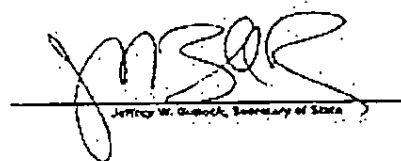
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Jeffrey W. Bullock, Secretary of State

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Date: 12-07-17

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