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SECRETARY OF STATE

THE FRANCE PLORIDA

200 NAR 28 PH 1: 54

O SIMMONS MAR 29 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 135280 7288091

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: March 27, 2018

ORDER TIME : 11:18 AM

ORDER NO. : 135280-005

CUSTOMER NO: 7288091

FOREIGN FILINGS

NAME: TREA 1560 CENTRAL AVENUE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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

IN COMPLIANCE WITH SECTION (05.002, FLORIDA SEATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED DABILITY COMPANY TO TRANSACT BUSINESS IN THE SEATE OF FLORIDA:

(Finance taux ailable, enter olternate)	aine adopted for the purpose of transacting business in Flor	idi. The alternate name must include "I imite-	d Liability Company " "L.L.C." or "LLC")
DELAWARE		3. 84-4914317	
eliarisdiction under the law of w	buch torogen humand harality company is organized;	#f1	number, if applicables
1 .			至高 🙃
	Otate that transacted business in Florida, if prior to a thee sections (4)5 (1964, A 14)5 (1965, E.N. to determin	egistration) ne penalty hability (
730 THIRD AVENUE	:	6. 730 THIRD AVENUE	調養工
(Street Address of		Mailing	Address 8
NEW YORK, NEW Y	ORK 10017	NEW YORK, NEW YO	
	<u></u>		<u> </u>
			08.07 08.07 08.07
Name and <u>street address</u>	ss of Florida registered agent: (P.O. Box	NOT acceptable)	Date of
Name:	Corporation Service Company		
4507	1201 Hays Street		
Office Address:			
	Tallahassee	, Florida <u>32301</u>	
Registered agent's accep	(Caly)	·/:	picodey
designated in this applica to comply with the provis	gistered agent and to accept service of pation, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent.	x registered agent and agree to	act in this capacity. I further agre
designated in this applica to comply with the provis	ition, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent. Corporation Services Company By:	s registered agent and agree to and complete performance of .	act in this capacity. I further agre my duties, and I am familiar with Hoxanne Turner
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Typed or printed name of signice

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TREA 1560 CENTRAL AVENUE 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 TWENTY-SEVENTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREA 1560

CENTRAL AVENUE LLC" WAS FORMED ON THE SIXTEENTH DAY OF MARCH, A.D.

2018.

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

Authentication: 202402178

Date: 03-27-18