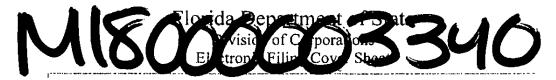
Division of Corporations

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Division of Corporations

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From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE

Account Number : 075350000353

Phone : (800)22172972 Fax Number : (888)69279256

**Enter the email address for this business entity to be used for thu annual report mailings. Enter only one email address please

Email Address:

Foreign Limited Liability Company BLUEROCK MORTGAGE, L.L.C.

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Help

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 FOREKIN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

L. Bluerock Mortgage, L.	.L.C.					
(Name of For	eign Limited Liability Company; mu	st include "Limited Liability Comp	oany, "L.L.C.," or	"U.J.('.")		-
		्रोत				_
Liability Company," "L.L.C.	lternate name adopted for the purpos ," or "LL.C.")	e of transacting business in Florida	a. The alternate nan	ne must inclu	.de "Lin	nited
2. NEW JERSEY		3. 81-3317201				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FE) nui	mber, if applicable)		•
4. UPON FILING				_		
		ess in Florida, if prior to registratio .0905, F.S. to determine penalty lid	n.) ability)	_		
5. 475 County Road 520	Suite 102 A Marlboro, NJ 07746	i		_		
				2		enseign is
(Street Address of Principal Office)					2	3 ∤
475 County Road 520 Suite 102 A Marlboro, NJ 07746					त्र्य	
				(4) (1) (4) (1) (4) (1) (1)	4	(80)214
	(Mailing a	Address)		- ह्यान	至	¥ É È
7 Name and street address	ss of Florida registered agent: (P.	O. Roy. NOT acceptable)		50	엹	STATE ALC:
1. Ivanie and <u>street addres</u>	BLUMBERGEXCELSIOR CO	"		22.7	(14) (14)	*Nesa *
Name:	BLUMBERGEACELSION CO	ON ORTE SERVICE, MO.			J	
Office Address:	155 Office Plaza Drive, 1st Ft.			•		
	TALLAHASSEE	, Florida	32301			
	(City)	*	(Zip code)	••		
designated in this applica to complywith the provisi	rgistered agent and to accept servition, I hereby accept the appoint ions of all statutes relative to the my position as registered agent.	iment as registered agent and a proper and complete performa	igree to act in thi	is capacity.	I furti	her agree
8 The name title or one	acity and address of the person(s)	who has/have authority to man	ane istare:			
	MBR, 475 County Road 520 Suite		age that.			
Robert Emoti Gomer, Ar	Misk, 473 County Road 520 Sun	c 102 // (via)(boto. 5/07/46				
John Dennis Fierro, AME	3R, 475 County Road 520 Suite I	02 A Marlboro, NJ 07746				
						
jurisdiction under the law o	of existence, no more than 90 days of which it is organized. (If the cerhmitted) Signature of its economic of State constitutes of State constitutes of State constitutes.	d'an authorized person	n aware that any (false inform		r the
submitted in a document to	ROBERT & CONTINUE	Ackard degree ready as pro-				
	Typed or pr	inten name of signee				

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

BLUEROCK MORTGAGE, L.L.C. 0600433427

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 July 20, 2016.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ROBERT E GOMER 475 COUNTY ROAD 520 SUITE 102A MARLBORO, NJ 07746



IN TEST MONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 5th day of April, 2018

Elizabeth Maher Muoio Acting State Treasurer

Certificate Number: 6087294429

Verify this certificate online at

https://www.l-state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp