(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:  W18-14785						
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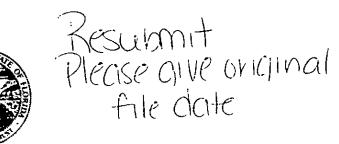
Office Use Only



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**B FIGUEROA** MAY 1 7 2018



Letter Number: 118A00010234

## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 16, 2018

CSC EMILY

SUBJECT: OPENDOOR PROPERTY W32 LLC

Ref. Number: W18000046785

We have received your document for OPENDOOR PROPERTY W32 LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

भूद मा ११ व स्था महास्था ।

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 207973 4304394

AUTHORIZATION : Spelle Class

COST LIMIT : \( \shi \) 160.00

ORDER DATE : May 15, 2018

ORDER TIME : 2:35 PM

ORDER NO. : 207973-035

CUSTOMER NO: 4304394

\_\_\_\_\_\_

### FOREIGN FILINGS

NAME: OPENDOOR PROPERTY W32 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: Emily Croft -- EXT# 62925

EXAMINER:

### **COVER LETTER**

то:	Registration Section Division of Corporations					
CHDH	OPENDOOR PROPERTY W32 LLC					
SUBJECT:Name of Limited Liability Company						
The en Exister	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florid					
Please	urn 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	er information concerning this matter, please call:					
	Erica Navarro 312 701-8492 at ( )					
	Name of Contact Person Area Code Daytime Telephone Number					
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Callahassee, FL 32314 Callahassee, FL 32314 Callahassee, FL 32301 Callahassee, FL 32301 Callahassee, FL 32301					
Enclos	is a check for the following amount:  \$\Boxed{1} \\$125.00 \text{ Filing Fee}  \Boxed{1} \\$130.00 \text{ Filing Fee}  \Boxed{2} \\$155.00 \text{ Filing Fee}  \Boxed{2} \\$160.00 \text{ Filing Fee, Certificate} \text{ of Status & Certified Copy}					

# 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. OPENDOOR PROPER (Name of Foreign	TY W32 LLC Limited Liability Company; must include "Limite	ed Liabilit	y Company," "L.L.C.," or "Ll.C.")	<del>_</del>	
(Manna apparailable, enter alternate po	ume adopted for the purpose of transacting business in Flo	onda The a	ternate name must include "Limited Liab	ulity Company," "L. L. C." or "LLC	:.")
Delaware	mic adopted for the pulpose of dansacting outsidess are re-			2 Ny 23 Ny 24 Ny 25 Ny	. ,
2. Delawate (jurisdiction under the law of which foreign limited liability company is organized)		3.	(FEI mumb	er, if applicable)	
4. Upon filing					
7	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605 0905, F.S. to determ	registration	L) Hability)		
5. 405 Howard Street, Su	ite 550	6	405 Howard Street, Suite 5.	50	
(Street Address of P	rincipal Office)	0.	(Mailing Addr	<b>C</b> (\$)	
San Francisco, CA 941	05		San Francisco, CA 94105		
				<b>20</b>	
7. Name and street address	s of Florida registered agent: (P.O. Box	x <u>NQT</u>	acceptable)	2018 MAY	
Name:	Corporation Service Company		<del></del>		
Office Address:	1201 Hays Street			35 5 55 5	1-1
	Tallahassee		, Florida 32301 (Zip code		
Registered agent's accep	(City)		(Zip code		
to comply with the provisi	tion, I hereby accept the appointment of ons of all statutes relative to the propers of my position as registered agent.  Corporation Service Companies:  (Registered agent's	ny A	mplete performance of my o	Emily Cro Asst. Vice Pre	ir with
8. The name, title or capa <u>Title or Capacity:</u>	ecity and address of the person(s) who h Name and Address:		authority to manage islate:	Name and Address:	otaciti
Opendoor Property Holde	to W LLC 405 Howard Street, Suite 550	)			
Sole Member	San Francisco, CA 94105				
1 1		<del>-</del> -			
(Use attachments if neces.	sary)				
9. Attached is a certificate	of existence, no more than 90 days old, of which it is organized. (If the certifica				
	uted in accordance with section 605.020 the Department of State constitutes a th				ion
	Signatur	e of an auth	orized person		
	See attached signature page				
		or printed n	unie 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: May 11, 2018

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

2018 MAY 15 AH 9: 53



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

DELAWARE, DO HEREBY CERTIFY "OPENDOOR PROPERTY W32 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 MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OPENDOOR PROPERTY W32 LLC" WAS FORMED ON THE TENTH DAY OF APRIL, A.D. 2018.

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

Authentication: 202643388

Date: 05-07-18