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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 300156 4341431 AUTHORIZATION COST LIMIT : \$\(\frac{1}{2}\)5\(\cdot\)00 ORDER DATE : July 16, 2018 ORDER TIME : 3:07 PM ORDER NO. : 300156-010 CUSTOMER NO: 4341431 FOREIGN FILINGS NAME: CAMELOT LAKES - VENTURE I, LLC XXXX_ QUALIFICATION (TYPE: <u>LL</u>) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

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 ILABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Date first transacted business in Florids, if prior to registration) (See sections 605,0904 & 605,0905, F.S. to determine penalty liab Road 6	(Mailing Add	ress)
(Date first transacted business in Florida, if prior to registration) (See accions 605,0904 & 605,0905, F.S. to determine penalty hab Road 6	(FEI numb	
f Florida registered agent: (P.O. Box NOT acc	(Mailing Add	ress)
f Florida registered agent: (P.O. Box NOT acc	(Mailing Add	ress)
f Florida registered agent: (P.O. Box NOT acc		rem)
f Florida registered agent: (P.O. Box <u>NOT</u> acc		ress)
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f Florida registered agent: (P.O. Box NOT acc	:eptable)	
	eptable)	一颗 万岁
	,	
orporation convice company		
		7 - 3
201 Hays Street		2316
allahassee	Florida 32301	5, 13
(Registered agent's signature)	<u> </u>	Asst. Vice Pre
wand address of the person(s) who has/have an	thority to manage is/own.	
		Name and Address:
WF Portfolio-Venture 1, LLC		
		 -
4350 E. Camelback Rd., Suite A100		
4350 E. Camelback Rd., Suite A100 Phoenix, Arizona 85018		
	(City) ce: level agent and to accept service of process for it, I hereby accept the appointment as registered of all statutes relative to the proper and completing position as registered agent. (Registered agent's signature) y and address of the person(s) who has/have authorized and Address: Title	(Zip cod ce: level agent and to accept service of process for the above stated limited it, I hereby accept the appointment as registered agent and agree to act is of all statutes relative to the proper and complete performance of my my position as registered agent (Registered agent's signature) y and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity:

Typed or printed name of signee Its: Member

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CAMELOT LAKES - VENTURE I, 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 SIXTEENTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAMELOT LAKES VENTURE I, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JULY, A.D.
2018.

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

Authentication: 203067573

Date: 07-16-18