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K. SALY SEP 1 0 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO.	:	I2000000195	
REFERENCE	:	376640	4304512

AUTHORIZATION :

COST LIMIT : \$\frac{1}{2}5.00

ORDER DATE : September 6, 2018

ORDER TIME : 2:05 PM

ORDER NO. : 376640-010

CUSTOMER NO: 4304512

FOREIGN FILINGS

NAME: HPA BORROWER 2018-1 ML LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

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

IN COMPLIANCE WITH SECT COMPANY TO TRANSACT BU	TION 605.0902 FLORIDA STATUTES, TH ISINESS IN THE STATE OF FLORIDA:	TE FOLLOWING IS SUBMITTED TO REG	ISTER A FOREIGN LIMITED LIABILITY
HPA Borrower 2018-1			
(Name of Fore	ign Limited Liability Company; must in	clude "Limited Liability Company," "L.I	C.," or "LLC.")
			and the state of t
(If name unavailable, enter al Liability Company," "L.L.C,"	itemate name adopted for the purpose of " or "LLC.")	transacting business in Florida. The alter	mate name must include "Limited
Delaware	,	32-0576905	
	of which foreign immted liability	(FEI number, if an	plicable)
, Upon qualification			
4. <u> </u>	(Date first transacted business to (See sections 605,0904 & 605,090	n Florida, if prior to registration.) 15, F.S. to determine penalty liability)	<u></u>
5. 180 North Stetson Ave	enue, Suite 3650, Chicago, IL 60601	, , , , , , , , , , , , , , , , , , , ,	S S
J			
	(Street Address of Prin	cipal Office)	
5 180 North Stesson Aver	nue, Suite 3650, Chicago, IL 60601	,	1
·			
	(Mailing Add	152)	Opt. 5
7 Name and street address	ss of Florida registered agent: (P.O.	Box NOT acceptable)	
	Corporation Service Company	,	· ·
Name:			
Office Address:	1201 Hays Street		
	Tallahassee	, Florida 32301 (Zip	
Registered agent's accep	(City)	(Z:p	code)
Having been named as rethis application, I hereby with the provisions of all the obligations of my posi-	gistered agent and to accept service accept the appointment as registered statutes relative to the proper and cition as registered agent. Corporation Service Company By: (Register	e of process for the above stated corpid agent and agree to act in this cupomplete performance of my duties, and agent's signatures	Emily Croft Asst. Vice President
		o has/have authority to manage is/ar	e :
William Young, Managir	ng Partner; Mark Wetzel, Chief Fin	ancial Officer; John S. Dowd, Senio	r Vice President;
Jonathan Babb, Senior Vice Pre	sident and General Counsel; Benjamin Helb	weg, Senior Vice President; Sharon S. Park, S	enior Vice President;
Ayoub A. Rubeh, Senior Vice Preside	ent, Diane M, Rittmanic, Senior Vice President; addre	ns for all of the above: 180 North Steason Avenue, Sun	c 3650, Chicago, II. 60601
9. Attached is a certificate jurisdiction under the law of the translator must be so	of which it is organized. (If the cert	old, duly authenticated by the official ficate is in a foreign language, a tran	I having custody of records in the slation of the certificate under oath
This document is executed submitted in a document to	o the Department of State constitutes	03 (1) (b), Florida Statutes. I am awar s a third degree felony as provided for	e that any false information in s.817.155, F.S.
	Diane M. Rittmanic		

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HPA BORROWER 2018-1 ML LLC" IS DULY

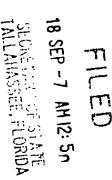
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SIXTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HPA BORROWER 2018-1 ML LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2018.

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





Authentication: 203374662

Date: 09-06-18

7029396 8300 SR# 20186532491