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Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 412959 AUTHORIZATION : Commellie Man COST LIMIT : \$ 125.00 ORDER DATE: September 26, 2018 ORDER TIME : 3:42 PM ORDER NO. : 412959-025 CUSTOMER NO: 4301969 FOREIGN FILINGS NAME: 212 SECOND AVE 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:

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301

COVER LETTER

	ision of Corporat	ions				
SUBJECT:	212 Second Ave	LLC				
•		Name o	of Limited Liability	Company	,	
The enclosed Existence, and	"Application by F d check are submi	foreign Limited Liability Co	mpany for Authoriz crenced foreign fim	ation to T ited liabil	ransact Business in Florida," Certifity company to transact business in	icate of Florida
		e concerning this matter to the				
	Christy Tirta	tunggal				
			Name of Person			
	Katten Much	in Rosenman LLP				
			Firm/Company			
	575 Madison	Avenue				
			Address		<u> </u>	
	New York, N	ew York, 10022				
		City/	State and Zip Code			
	PLeahy@Shore	instein.com				
		E-mail address: (to be us	ed for future annual	report no	tification)	
For further info	ormation concerni	ng this matter, please call:				
Chris	ty Tirtatunggal		212 at (940-64	84	
	Name	of Contact Person	Area Code	Day	rtime Telephone Number	
Divisi Regist P.O. E	UNG ADDRESS on of Corporation tration Section Box 6327 tassee, FL 32314	<u>:</u> s		Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding secutive Center Circle see, FL 32301	
Enclosed is a cl a \$12	heck for the follow 15.00 Filing Fee	ving amount: S130.00 Filing Fee & Certificate of Status	S155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 805.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED ITABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Limited Liability Company, must include "L	imited Liability Company," "L.I. C.," or "LLC."	·}	
Delaware	anic adopted for the purpose of transacting business	in Florida. The alternate name must include "Limited Li	ability Company," "L.L.C," or "LLC,")	
• •	such foreign limited liability company is organized)			
	and the state of t	(FEI min	ober, if applicable)	
, <u> </u>	_			
	(Date first transacted business in Florida, if po (See sections 605 0904 & 605 0905, F.S. to de	or to recistration.)		
c/o Shorenstein Proper	ties LLC. Russ Building			
(Street Address of	rincipal Office)	6. c/o Shorenstein Properties		
235 Montgomery Stree	et, 16th Floor	(Mailing Address) 235 Montgomery Street, 16th Floor		
San Francisco, Californ	nia 94104	San Francisco, California 94104:		
		San Francisco, Camornia	74104:	
Nama and state add	279			
Name and street addres	s of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)	J. 12	
Name:	Corporation Service Company			
			至	
Office Address:	1201 Hays Street	····	, Q	
	Tallahassee	22201	13 8	
	#Citod	Florida 32301		
gistered agent's accept	ance:	of process for the above stated limited		
comply with the provision of accept the obligations	ons of all statutes relative to the proful of my position as registered agent. Corporation Service Company -	per and complete perfor mily Cro	in this capacity. I further ag atties, and I am familiar with	
comply with the provision and accept the obligations	ons of all statutes relative to the prof of my position as registered agent Corporation Service Company - By: (Registered agent	per and complete perfor Emity Cro Asst. Vice Pres	in this capacity. I further ag aties, and I am familiar with	
comply with the provision of accept the obligations. The name, title or capac	ons of all statutes relative to the property of my position as registered agent. Corporation Service Company— (Registered agent) City and address of the person(s) who	per and complete perfor Emity Cro Asst. Vice Pres	in this capacity. I further ag aties, and I am familiar with	
comply with the provision of accept the obligations The name, title or capacity:	ons of all statutes relative to the pro- of my position as registered agent. Corporation Service Company- By: (Registered agent city and address of the person(s) who Name and Address:	Asst. Vice Presentation of has/have authority to manage is/are:	in this capacity. I further ag fuies, and I am familiar with sident	
comply with the provision of accept the obligations The name, title or capac	cons of all statutes relative to the proposition as registered agent. Corporation Service Company - (Registered agent. City and address of the person(s) who Name and Address: 212 Second Ave Holdings 111.0	Asst. Vice Presentation of has/have authority to manage is/are:	in this capacity. I further ag atties, and I am familiar with	
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "212 SECOND AVE 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-EIGHTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "212 SECOND AVE LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2018.

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

Authentication: 203516391

Date: 09-28-18

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