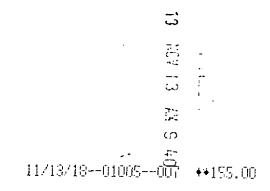
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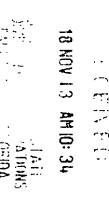
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| Special Instructions to | Filing Officer: | |
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CORPORATE ACCESS, _____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

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| | SW 24 TH AVENUE, LLC | | | | | |
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COVER LETTER

| Divisio | on of Corporati | ons | | | | |
|-------------------------------------|---|---|---------------------------------|--|---|------------------|
| SUBJECT: | W 24th Avenue, | LLC | | | | |
| _ | | Name o | f Limited Liability | Company | | |
| The enclosed "A Existence, and o | Application by F theck are submit | oreign Limited Linhilling Co- | manu fan Anstra 1 | | ransact Business in Florida," Certific ity company to transact business in F | ate of lorida |
| Please return all | correspondence | concerning this matter to th | e following: | | | |
| | Jessica French | 1 | | | | |
| | | | Name of Person | | | |
| | Kayne Anders | on Real Estate Advisors, LI | .c | | | |
| | | 1 | Firm/Company | | | |
| | One Town Ce | nter Road, STE 300 | | | | |
| | · · · · · | | Address | - | | |
| | Boca Raton, F | L 33486 | | | | |
| | | City/9 | State and Zip Code | | | |
| | jfrench@kaynec | apital.com | | | | |
| - | | E-mail address: (to be use | d for future annua | report not | tification) | |
| For further inform | nation concernir | ng this matter, please call: | | | · | |
| Jessica | | | 561 at (| 300-62 | 55 | |
| | Name o | of Contact Person | Area Code | Day | time Telephone Number | |
| Division Registral P.O. Box | NG ADDRESS: of Corporations tion Section x 6327 see, FL 32314 | • | | Division Registrati Clifton B 2661 Exe | CADDRESS: of Corporations ion Section uilding cutive Center Circle ce, FL 32301 | |
| Enclosed is a chec \$125.0 | ck for the follow 00 Filing Fee | ing amount: ☐ \$130.00 Filing Fee & Certificate of Status | S155.00 Filin 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 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | oreign Lunited Liability Company; must in | ectude "Limited Liability Company," "L.L.C.," or " | J.C."1 |
|---|--|---|--|
| | | transacting business in Florida. The alternate name | |
| Liability Company," "L.L.) Delaware | 2," or "LLC.") | e state of the first factorial frame | must include "Limited |
| (Jurisdiction under the la | wof which from the Little | 3 | |
| Ourisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable) | | | |
| UPON FILING | | | , |
| | (Date first transacted business in (See sections 605,0904 & 605,090 | r Florida, if prior to registration.) 5, F.S. to determine penalty liability) | |
| c/o Kayne Anderson | Real Estate Advisors, LLC | - Penalty Haditity | |
| One Town Center Road, STE 300, Boca Raton, FL 33486 | | | T) |
| | (Street Address of Princ | ripol Office | ~ `, |
| c/o Kayne Anderson Real Estate Advisors, LLC | | | , , |
| | | 6 | |
| One Town Center Road, STE 300, Boca Raton, FL 33486 (Mailing Address) | | 77 | |
| Nome and access 11 | | | , ~ |
| . Name and street addre | ss of Florida registered agent: (P.O. B | Box <u>NOT</u> acceptable) | 5 |
| Name: | NRAI Services, Inc. | | ,* |
| Office Address: | 1200 South Pine Island Road | | |
| | Plantation | 13334 | |
| egistered agent's accep | (City) | , Florida 33324 (Zip code) | |
| ith the provisions of all e obligations of my pos | egistered agent and to accept service a accept the appointment as registered statutes relative to the proper and conition as registered agent. NRAI Services: | of process for the above stated corporation at agent and agree to act in this capacity. I fur implete performance of my duties, and I am faices, Inc. | ther agree to comply miliar with und accept |
| | (Registered a | igent's signature) | > 1,774. 76 |
| . The name, title or capa | acity and address of the person(s) who | has/have authority to manage is/are- | |
| cegan T. Motisi, Autho | rized Person | to manage mare. | |
| Town Center Road, Sui | te 300 | | |
| | | | |
| oca Raton, FL 33486 | | | |
| oca Raton, FL 33486 | | | |
| Attached is a certificate isdiction under the law | of existence, no more than 90 days old of which it is organized. (If the certific bmitted) | f, duly authenticated by the official having cus ate is in a foreign language, a translation of the | ody of records in the certificate under oath |
| Attached is a certificate risdiction under the law of the translator must be su | of existence, no more than 90 days old of which it is organized. (If the certific ibmitted) | d, duly authenticated by the official having cus ate is in a foreign language, a translation of the | ody of records in the certificate under oath |
| Attached is a certificate isdiction under the law of the translator must be su | Signature of an a | d, duly authenticated by the official having custate is in a foreign language, a translation of the sutherized person 1) (b). Florida Statutes, I am aware that any fall hird degree felony as provided for in s.817.155 | certificate under oath |

Typed or printed name of signee

Meegan T. Motisi

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SW 24TH AVENUE, 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 NINTH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SW 24TH AVENUE, LLC" WAS FORMED ON THE SEVENTH DAY OF NOVEMBER, A.D. 2018.

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

at corp delaware poy/auti

Authentication: 203873411

Date: 11-09-18