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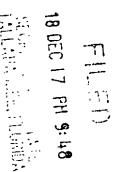
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| Certified Copies | Certificate | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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December 13, 2018

ALICE ROWCLIFFE CHANDLER RESIDENTIAL, INC. 11719-B JEFFERSON AVE, STE. 103 NEWPORT NEWS, VA 23606

SUBJECT: CHANDLER BALLSTON LLC

Ref. Number: W18000107579

We have received your document for CHANDLER BALLSTON LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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.

Letter Number: 718A00025643

Karen A Saly Regulatory Specialist II

www.sunbiz.org

DO NOT DO

COVER LETTER

TO:

Registration Section

| Div | rision of Corporatio | ns | | | | | |
|------------------------------|---|--|-----------------|---|--|-----------------------------------|--|
| | Ballston LLC - | * | | | | | |
| SUBJECT: | Ballston LLC - | please see mo | te the | low. | | | |
| | | please see mo Name of Lin | nited Liability | Company . | | • | |
| The enclosed Existence, a | d "Application by Fo | reign Limited Liability Company ed to register the above reference | y for Authoriza | ation to Transact | Business in Florida, | " Certificate of ness in Florida. | |
| Please return | all correspondence | concerning this matter to the following | lowing: | | | | |
| | Alice Rowclift | Fe . | | | | | |
| | · | Name | of Person | | | • | |
| | Chandler Resid | dential, Inc. | | | | | |
| | Firm/Company | | | | | • | |
| | 11719-B Jeffer | rson Ave., Ste. 103 | | | | | |
| | | Address | | | | | |
| | Newport News VA 23606 | | | | | | |
| | | City/State and Zip Code | | | | | |
| | arowcliffe@cha | | | | | | |
| | | E-mail address: (to be used for | r future annual | report notificati | ion) | | |
| For further in | nformation concerning | g this matter, please call: | | | | | |
| Ali | ce Rowcliffe | a | 757 t (| 873-4225 | | | |
| | Name o | of Contact Person | Area Code | Daytime 1 | Telephone Number | | |
| Div Reg P.O | ILING ADDRESS: ision of Corporation: istration Section . Box 6327 ahassee, FL 32314 | | | STREET ADI Division of Co Registration Se Clifton Buildin 2661 Executive Tallahassee, FI | rporations ection g e Center Circle | | |
| _ | check for the follow \$125.00 Filing Fee | ring amount: S130.00 Filing Fee & Certificate of Status | | Filing Fee & ed Copy | S160.00 Filing of Status & Cert | | |

We formed a Florida entity under the name Ballston LLC on November 14, 2018, but subsequently terminated it because we were advised by our attorney that the entity needed to be a Delaware entity. We formed the Delaware LLC, and now be need to qualify it in Florida. Although the name already exists in your database, we respectfully request permission to use the name Ballston LLC for our foreign registration since it is the same entity that was formed earlier this month (L18000244666) and terminated.

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

IN COMPLANCE WITH SECTION 405 0002 FLORIDA STAILTIES. THE FOLLOWING IS SUBMITTED TO RECISTER A FOREKIN LIMITED HABILITY

COMPANY TO TRANSICT BUSINESS IN THE STATE OF FLORIDA: Ballston LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC") Chandler Ballston LLC (Hinanic univaliable, enter alternate name adopted for the purpose of transacting business in Florids. The alternate mone treat include "Limited Liabator, Company," "L.L.C." or "U.C.") 83-2544021 Defaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 603 0994 & 603 0935, F.S. to determine penalty liability) 11719-B Jefferson Ave., Ste. 103 11719-B Jefferson Ave., Stc. 103 (Street Address of Principal Office) (Mailing Address) Newport News, VA 23606 Newport News, VA 23606 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Laura A. Holmes Name: 1500 Ocean Drive, Unit 1105 Office Address: Miami Beach . Florida (City) (Zip code) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

| 8. The name, title or capacity and add Title or Capacity: | dress of the person(s) who has/have authority to manage is/are: 18 OE | C17 PH 9:4 |
|--|---|---|
| | $i\widetilde{\delta}i\widetilde{S}$. | PH 9: 1. |
| Pres. of the Manager | Paul C. Jost | 9:4 |
| | 1500 Ocean Dr., Unit 1105 | 1. Onio |
| | Miami Beach FL 33139 | |
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| (Use attachments if necessary) | | |
| Attached is a certificate of existence, r jurisdiction under the law of which it is o of the translator must be submitted) | no more than 90 days old, duly authenticated by the official having custody organized. (If the certificate is in a foreign language, a translation of the ce | y of records in the rtificate under oa |
| 10. This document is executed in accordance submitted in a document to the Departme | ance with section 605.0203 (1) (b), Florida Statutes. I am aware that any faint of State constitutes a third degree felony as provided for in s.817.155, F | .S. |
| | CRF Menes ent. Inc., Menes Signature of an authorized person Paul C. Just | c- de-t |
| | Signature of an authorized person | |
| | raul c, Just | |
| | Typed or printed name of signee | |



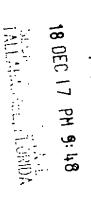
Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BALLSTON 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 THIRD DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BALLSTON LLC"

WAS FORMED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2018.

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





Authentication: 204008331

Date: 12-03-18