Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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APR 2 9 2019

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

CRP/Contravest Addis	son Lake Bryan Owner, L.L.C.		
(Name of Foreign	s Limited Liability Company; most include "Limit	Lizbility Company," "LLC." or "LLC.")	 .
umo unaveilable, enter alternato	name edopted for the purpose of immoniting business in F	ids. The atternate nume mater include "Limited Liability Company,"	"LilaCi" of "LLC.")
Delaware		Applied For	
(harisdiction under the law of v	which foreign limited liability company is organized)	3. (FEI number, if applicable)	
N/A			
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	(See sections 605.0904 & 605.0905, F.S. to determ		
1001 Pennsylvania Ave NW, Suite 220 South (Street Address of Sweeps) Office)		6. (Maning Address)) South
		(Mailing Address)	
		Washington DC 20004	
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Name:	C T Corporation System 1200 South Pine Island Road	TASSEE, FLORIDA	PILED 2019 APR 26 PM 4: 29
Name:	C T Corporation System 1200 South Pine Island Road	TASSEE, FLORIDA	2019 APR 26 PM 4: 29 SECREMAN
Name: Office Address:	C T Corporation System 1200 South Pine Island Road Plantation (City)	TASSEE, FLORIDA	2019 APR 26 PH 4: 29
Name: Office Address:	C T Corporation System 1200 South Pine Island Road Plantation (City)	Florida 33324 Plorida (Zip code)	2019 APR 26 PM 4: 29
Name: ()flice Address: gistered agent's acception been named as r.	C T Corporation System 1200 South Pine Island Road Plantation (City) Stance: egistered agent and to accept service of	Florida 33324 Process for the above stated limited liability con	SECRE 14: 29 In 1 L E D In 1 L E D
Name: Office Address: gistered agent's accepting been named as resignated in this applications with the provisions and the provisions of the provisions of the provisions and the provisions are the prov	C T Corporation System 1200 South Pine Island Road Plantation (City) Stance: existered agent and to accept service of the appointment vitions of all statutes relative to the prope	Florida 33324 Plorida (Zip code)	city. I further agi
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Name: Office Address: gistered agent's accepting been named as reignated in this applications with the proviscomply with the proviscomple with the provi	C T Corporation System 1200 South Pine Island Road Plantation (City) Stance: existered agent and to accept service of the appointment vitions of all statutes relative to the prope	Florida Flo	city. I further agi

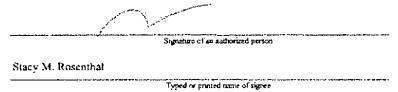
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8.	For initial indexing purposes,	list names,	title or capacity	y and addresses	of the primary	members/managers	or persons authorized	i to
n18	nage (up to six (6) total):							

Title or Capacity:	Name and Address:	Title or Capacity	<u>:</u>	Name and Address:
Manager	Name: CRP/Contravest Addison Lake	Manager	Name:	
Member	Address: Bryan Owner, L.L.C	Member	Address:	
☐Authorized	1001 Pennsylvania Ave NW, Suite 220S	Authorized		
Person	Washington DC 20004	Person		
Other	☐ Other	Other		Other
∐Manager	Name:	Manager	Name:	
☐Member	Address:	Member	Address:	בה 19
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Authorized		☐ Authorized	<u> </u>	
Person		Person	****	
Other	Other	Other	81. a.m a star of F 61 or 64	Other

<u>Important Notice:</u> Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Delaware

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRP/CONTRAVEST ADDISON LAKE BRYAN OWNER, L.L.C." 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-FIFTH DAY OF APRIL, A.D. 2019.

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



7390046 8300 SR# 20193205959

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202712942

Date: 04-25-19