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Division of Corporations

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From:

Account Name : JAM MARK LIMITED Account Number: 12000000112
Phone: (305)789-7758
Fax Number: (305)789-7799

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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TDC TAMPA OZ PARTNERS, LLC

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTIONI	1-4 must be completed)	
. Name of limited liability Company as it appears or	n the records of the Florid	a Departifieritär - 9 P 2: 2
State: TDC TAMPA OZ PARTNERS, LLC		SEODI LARY OF-STA E TALLAHASSEE, FLORIC
Enter new principal office address, if applicable:		
<u>Principal office address</u> MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited liabili	ty company is:	11551
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 12/04/20	119	
SECTION II (5-9 complete only the applicable cha		
5. New name of the limited liability company:(must co	ntain "Limited Liability C	Company, ""L.L.C.," or "L.L.C.")
If name unavailable, enter alternate name adopted for copy of the written consent of the managers or managens of the managers." "L.L.C."	r the purpose of transacting ing members adopting the or "LLC.")	g business in Florida and attach a e alternate name. The alternate nar
b. If amending the registered agent and/or registered or registered agent and/or the new registered office addresses	officer address on our reco	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Ent El	rida Street Address
		, Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

itle/ Capacity	<u>Name</u>	Address Type	of Actio
MGR	Jeff Goldstein	ACRE - Asia Capital Real Estate	□Add
		822 N A1A Hwy Ste 310 Ponte Vedra FL 32082	■Remo
dGR	Les Menkes	ACRE - Asia Capital Real Estate	□Add
		822 N A1A Hwy Ste 310 Ponte Vedra FL 32082	≅Remo
MGR	Michael Van Der Poel	ACRE - Asia Capital Real Estate	□Add
	822 N A1A Hwy Ste 310 Ponte Vedra FL 32082	≣Remo	
MGR TDC Tampa Investor, L.L.C.	ACRE - Asia Capital Real Estate	≣∧dd	
	822 N A1A Hwy Ste 310 Ponte Vedra FL 32082	□Remo	
		□Add	

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TDC TAMPA OZ PARTNERS, 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 FOURTH DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TDC TAMPA OZ PARTNERS, LLC" WAS FORMED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2019.

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

Authentication: 204132519

Date: 12-04-19