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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 112401 8171235

AUTHORIZATION :

COST LIMIT

ORDER DATE: December 23, 2019

ORDER TIME : 2:26 PM

ORDER NO. : 112401-070

CUSTOMER NO: 8171235

## FOREIGN FILINGS

NAME: 1121 JACARANDA BOULEVARD 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: Kadesha Roberson -- EXT# 62980

EXAMINER:

## 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 1121 Jacaranda Bou	Limited Liability Company; must include "Limite	d Liabilit	y Company," "L. L.	C.," or "LLC.")			
(If name unavailable, enter alternate r	same adopted for the purpose of transacting business in Flo	orida The al	ternate name must inc	lude "Limited Liability	Company," "	L.L.C." or	LLC.")
Delaware		_	84-3635581			201	
2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3.		(FEI number, t	fapplicable)	2019 DEC 23	11
4					- XSSE	23	
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration ine penalty	) liability )		ime.	PA	
One SeaGate, Suite 1500			One SeaGate	e, Suite 1500	.C. 80 D.	PM 4: 45	1_
(Street Address of	Principal Office)	6.		(Mailing Address)	<u> </u>	<u></u>	<del></del>
Toledo, Ohio 43604			Toledo, Ohio	43604			
<del></del>	<del></del>						_
							_
7 Name and street address	on of Elopida registered quante (D.O. Dou	NOT -					
7. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	NOT a	icceptaole)				
Name:	Corporation Service Company						
Office Address:	1201 Hays Street						
	Tallahassee		Florida	32301			
	(City)		, Florida	(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.

Kadesha Roberson Asst. Vice President

Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: ReNew MG Landlord LLC Manager Name: \_\_\_\_ Manager One SeaGate, Suite 1500 Member Address: \_\_\_\_\_\_ ■ Member Address: Tolcdo, Ohio 43604 Authorized Authorized Person Person Other Other\_\_\_ Other Name: \_\_\_\_\_ Manager Name: Manager Member | Address: Member Address: Authorized ☐ Authorized Person Person Other Other\_ Other\_\_\_\_ Other\_ Name: \_\_\_\_\_\_ Manager Member Member | Address: Authorized Authorized Person Person Other\_\_\_\_ Other Other\_\_\_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. I 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. Steven W. Schroeder, Authorized Person

Typed or printed name of signee

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "1121 JACARANDA BOULEVARD 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-THIRD DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "1121 JACARANDA BOULEVARD LLC" WAS FORMED ON THE SIXTH DAY OF NOVEMBER, A.D. 2019.

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

Authentication: 204286010

Date: 12-23-19