Fm: Interstate Filings LLC To: 7207 SW 24 RE LLC
12/8/2020 15 Filorida Deparament of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

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

Email Address: orders@interstatefilings.com

Foreign Limited Liability Company
7207 SW 24 RE LLC

| Certificate of Status | 0 |
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| m:Interstate | To:7207 12/10/20 | | | |
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

| FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLOR | TDA: |
|--|---|
| _{1.} 7207 SW 24 RE LLC | |
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of | or "LLC.") |
| | |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate a Liability Company," "L.L.C," or "L.L.C,") | iame must include "Limited |
| , DELAWARE | |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applie company is organized) | cable) |
| | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penulty liability) | <u> </u> |
| 5. 2071 FLATBUSH AVENUE SUITE 22 | |
| BROOKLYN, NY 11234 | |
| (Street Address of Principal Office) | |
| 6. 2071 FLATBUSH AVENUE SUITE 22 | |
| BROOKLYN, NY 11234 | |
| (Mailing Address) | 2: |
| 7. The name, title or capacity and address of the person(s) who has/have authority to n | •••• 1 |
| CORAL PARTNERS I LLC, MGRM | <u>.</u> |
| 2074 ELATRUSU AVENUE SUITE 22 | C |
| 2071 FLATBUSH AVENUE SUITE 22 | |
| BROOKLYN, NY 11234 | <u>့</u> |
| | C) |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly author having custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of the document constitutes an affirmation under the penalties of perjuit measure that any false information submitted in a document to the Department of State constitutes a third degree fellowy as providence. | photocopy is not er oath of the translator ry that the facts stated herein are true |
| DAVID KATZ | |
| Typed or printed name of signce | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| FC | DLLOV | VING ST. | ATEMENT | TO DESI | GNATE | A REGIS | TERED C | PFICE AN | ID REGIS | STERED |
|----|-------|-----------|-------------|-------------|--------------|---------|---------|----------|----------|--------|
| A(| GENT | IN THE S | STATE OF | FLORIDA | ١. | | | | | |
| | | | | | | | | | | |
| 1. | The n | ame of th | e Limited L | Liability C | ompany i | s: | | | | |

| 7207 SW 24 RE LLC | | |
|-------------------|---------------|--|
| | _ | |

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

INTERSTATE AGENT SERVICES, LLC

(Name)

100 SE 2nd Street Suite 2000 #209

Florida Street Address (P.O. Box NOT ACCEPTABLE)

MIAMI __ 33131

City/State/Zip

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 certificate, 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 relating 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, Florida

Statutes.

(Signature)

Fm: Interstate Filings LLC To: 7207 SW 24 RE LLC 15:46 12/10/20 FT Pg 4-6 (((H20000419246 3)))

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "7207 SW 24 RE 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 EIGHTH DAY OF DECEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "7207 SW 24 RELLC" WAS FORMED ON THE SECOND DAY OF DECEMBER, A.D. 2020.

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

Authentication: 204256700

Date: 12-08-20

4317284 8300

SR# 20208585271

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