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(Address)		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 2, 2021

SCOTT K. MULFORD 468 HIGH TIDE DRIVE ST. AUGUSTINE, FL 32080

SUBJECT: REBAR SECURED LENDING FUND 1 LLC

Ref. Number: W21000010633

We have received your document for REBAR SECURED LENDING FUND 1 LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$777.50.

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: 221A00002296

Yvette Scott Document Specialist II

www.sunbiz.org

Division of Company in an D.O. BOY 6207 Wellahaman Florida 2021

Crabtnee Law Group, P.A.
ATTORNEYS AND COUNSELORS AT LAW

ZACHARY C. CRABTREE CHARLES W. BROWN, JR. RACHEL R. TAUBE 8777 SAN JOSE BOULEVARD BUILDING A, SUITE 200 JACKSONVILLE, FLORIDA 32217

A. M. CRABTREE, JR. (1924-1995) R. R. CRABTREE

(1955-2017)

TELEPHONE (904) 732-9701 TELECOPIER (904) 732-9702

January 25, 2021

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: REBAR SECURED LENDING FUND 1 LLC

Foreign Entity Filing DOS ID #7704268

Initial DOS Filing Date in Delaware: November 14, 2019

(NOComma) - T

To Whom It May Concern:

Crabtree Law Group Attn: Caroline Ramsay 8777 San Jose Boulevard, Bldg. A. Suite 200 Jacksonville, FL 32207

If you should have any questions in regard to this matter, please do not hesitate to contact our office at 904-732-9701 or you can email err@crabtreefirm.com. Thank you for your help with this matter.

Sincerely.

Caroline Ramsay

err Enclosure

COVER LETTER

TO: Registration Section

Division of Corporations			
SUBJECT:	Rebar Secured Lending Fund 1 LLC, a Del	aware limited liability company	
	Nam	e of Limited Liability Company	
The enclosed Existence, as	1 "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.	
Please return	all correspondence concerning this matter t	o the following:	
	Scott K Mulford		
		Name of Person	
	Rebar Secured Lending Fund 1 LLC, a Delaware limited liability company Firm/Company		
	Firm/Company 1		
	468 High Tide Drive	Address	
	Address		
	St. Augustine. Florida 32080	Address PR - 12	
	C	City/State and Zip Code	
	ken@rebar-capital.com		
	E-mail address: (to be	e used for future annual report notification)	
For further in	nformation concerning this matter, please ca	H:	
Scott K Mulford		914 282-8564 at ()	
	Name of Contact Person	Area Code Daytime Telephone Number	
Mailing Address:		Street Address:	
Registration Section		Registration Section Division of Corporations	
Division of Corporations P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	
1 a	nanassee. FL 32314	Tallahassee, FL 32303	
Ple	closed is a check for the following amount: ase make check payable to: FLORIDA DEI \$125.00 Filing Fee S130.00 Filing Fe Certificate of	ee & 🔲 \$155.00 Filing Fee & 🗍 \$160.00 Filing Fee, Certificate	

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 Rebar Secured Lending Fund 1 LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC,") 7704268 Delaware (FE! number, if applicable) (Jurisdiction under the law of which foreign lumited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 468 High Tide Drive 468 High Tide Drive (Street Address of Principal Office) St. Augustine, FL 32080 St. Augustine, FL 32080 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Scott K Mulford Name: 468 High Tide Drive Office Address: St. Augustine (City) 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.

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: Sunny Mulford Scott K Mulford Name: □Manager □ Manager 468 High Tide Drive 468 High Tide Drive ☐ Member ☐Member Address: St. Augustine, FL 32080 St. Augustine, FL 32080 Authorized Authorized Person Person MGRM MGRM Other. Other____ **⊟** Other □Manager Name: Name: ______ □ Manager ☐ Member Address: □Member □ Authorized □ Authorized Person Person Other____ Other____ Other_ □Other Name: _____ Name: □Manager □Manager □Member Address: □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.

Signature of an authorized person

Typed or printed name of signes

Scott K Mulford

Delaware

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "REBAR SECURED LENDING FUND 1 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-SECOND DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REBAR SECURED LENDING FUND 1 LLC" WAS FORMED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2019.

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

Authentication: 202344392

Date: 01-22-21

7704268 8300 SR# 20210191893