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**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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**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

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

Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
Upward America Southeast Property Owner GP, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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*[Handwritten signature]*

**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:*

1. Upward America Southeast Property Owner GP, 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.")

2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_  
(FEI number, if applicable)

4. January 25, 2021  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 700 NW 107th Avenue  
(Street Address of Principal Office)

6. 700 NW 107th Avenue  
(Mailing Address)

Suite 400

Suite 400

Miami, FL 33172

Miami, FL 33172

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporate Creations Network Inc.

Office Address: 801 US Highway 1

North Palm Beach, Florida 33408  
(City) (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.*

/s/ Caitlin Lazarus  
(Registered agent's signature)

Caitlin Lazarus, Special Secretary

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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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Stuart Miller</u>	<input type="checkbox"/> Manager	Name: <u>Mark Sustana</u>
<input type="checkbox"/> Member	Address: <u>700 NW 107th Avenue</u>	<input type="checkbox"/> Member	Address: <u>700 NW 107th Avenue</u>
<input type="checkbox"/> Authorized	<u>Suite 400</u>	<input type="checkbox"/> Authorized	<u>Suite 400</u>
Person	<u>Miami, FL 33172</u>	Person	<u>Miami, FL 33172</u>
<input checked="" type="checkbox"/> Other <u>Executive Chairm:</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>VP, Secretary &amp; C</u>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Richard Beckwitt</u>	<input type="checkbox"/> Manager	Name: <u>Diane Bessette</u>
<input type="checkbox"/> Member	Address: <u>1707 Marketplace Blvd</u>	<input type="checkbox"/> Member	Address: <u>700 NW 107th Avenue</u>
<input type="checkbox"/> Authorized	<u>Suite 270</u>	<input type="checkbox"/> Authorized	<u>Suite 400</u>
Person	<u>Irving, TX 75063</u>	Person	<u>Miami, FL 33172</u>
<input checked="" type="checkbox"/> Other <u>Co-CEO &amp; Co-Pri</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>VP, CFO, Treasur</u>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Jonathan M. Jaffe</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>15131 Alton Parkway</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Irvine, CA 92618</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input checked="" type="checkbox"/> Other <u>Co-CEO &amp; Co-Pri</u>	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

**Important Notice:** 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. 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.

DocuSigned by  
Mark Sustana  
147E137E0065476  
Signature of an authorized person  
  
Mark Sustana  
\_\_\_\_\_  
Typed or printed name of signee

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UPWARD AMERICA SOUTHEAST PROPERTY OWNER GP, 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 SECOND DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UPWARD AMERICA SOUTHEAST PROPERTY OWNER GP, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JANUARY, A.D. 2021.

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

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STATE OF DELAWARE



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SR# 20210764485

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202628299

Date: 03-02-21