

W21000002533

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

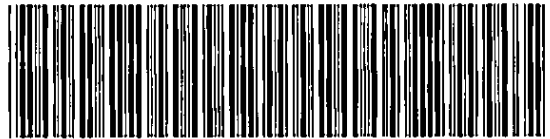
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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 686001 7972777

AUTHORIZATION

*[Signature]*

COST LIMIT : \$130.00

ORDER DATE : March 1, 2021

ORDER TIME : 11:37 AM

ORDER NO. : 686001-005

CUSTOMER NO: 7972777

FOREIGN FILINGS

NAME: 295 107 CIRCLE OWNER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
XX \_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

**RESUBMIT**  
Please give original  
submission date as file date.

3/2/21

March 3, 2021

CSC

SUBJECT: 295 107 CIRCLE OWNER LLC  
Ref. Number: W21000029622

We have received your document for 295 107 CIRCLE OWNER LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Either remove the address where see attached or add the officer name.

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.

Sharon D Franklin  
Regulatory Specialist II

Letter Number: 421A00004581

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 295 107 Circle Owner LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Danielle Sands

\_\_\_\_\_  
Name of Person

Revantage Corporate Services, LLC

\_\_\_\_\_  
Firm/Company

233 S. Wacker Drive, Suite 4700

\_\_\_\_\_  
Address

Chicago, IL 60606

\_\_\_\_\_  
City/State and Zip Code

dsands@revantage.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danielle Sands

312

466-3400

at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee    ☒ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. 295 107 Circle Owner LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")

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

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

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

5. 233 S. Wacker Drive, Suite 4700  
(Street Address of Principal Office)

6. 233 S. Wacker Drive, Suite 4700  
(Mailing Address)

Chicago, IL 60606

Chicago, IL 60606

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(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.

Corporation Service Company

By: Amanda E. Holman  
(Registered agent's signature)

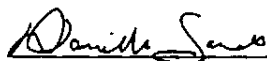
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<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>B9 MF Dragon Member LLC</u>	<input checked="" type="checkbox"/> Manager	Name: <u>See attached.</u>
<input checked="" type="checkbox"/> Member	Address: <u>233 S. Wacker Drive, Suite 4700</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Chicago, IL 60606</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	 Name: _____	 <input type="checkbox"/> Manager	 Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	 Name: _____	 <input type="checkbox"/> Manager	 Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<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.



Signature of an authorized person

Danielle Sands

Typed or printed name of signer

FLORIDA DEPARTMENT OF STATE

ATTACHMENT TO THE APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

**295 107 CIRCLE OWNER LLC**

8. Names, titles and capacity and address of the primary members/managers or person authorized to manage:

<u>Title or Capacity</u>	<u>Name and Address</u>
Senior Managing Director and Vice President	A.J. Agarwal 345 Park Avenue New York, NY 10154
Senior Managing Director and President	Kenneth A. Caplan 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Frank Cohen 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Giovanni Cutaia 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Robert Harper 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Tyler Henritze 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Brian Kim 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Kathleen McCarthy 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Nadeem Meghji 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	William J. Stein 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Wesley LePatner 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Jacob Werner 345 Park Avenue New York, NY 10154

Senior Managing Director and Vice President	Michael Lascher 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	David Levine 345 Park Avenue New York, NY 10154
Senior Managing Director and Vice President	Michael Wiebolt 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Michael Anthony 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Doug Armer 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Anthony Beovich 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Byron Blount 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Andrea Drasites 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Adam Leslie 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Ron Bernstein 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Qahir Madhany 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Anthony F. Marone, Jr. 345 Park Avenue New York, NY 10154
Managing Director and Vice President	T. Max O'Neill 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Melissa Pianko 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Paul Quinlan 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Scott Trebilco 345 Park Avenue New York, NY 10154



Managing Director and Vice President	Karen Sprogis 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Leon Volchyok 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Ryan Ingle 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Joshua Carson 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Eric Wu 345 Park Avenue New York, NY 10154
Managing Director and Vice President	John Prete 345 Park Avenue New York, NY 10154
Managing Director and Vice President	David Zackowitz 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Brian Kaufman 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Mike Forman 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Chris Graham 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Asim Hamid 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Joseph Rocco 345 Park Avenue New York, NY 10154
Managing Director and Vice President	Marshall Nevins 345 Park Avenue New York, NY 10154
Principal and Vice President	Brian Lin 345 Park Avenue New York, NY 10154
Principal and Vice President	Anthony Cerrone 345 Park Avenue New York, NY 10154
Chief Accounting Officer	Nicole Grimadli 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Vice President – Accounting	Michael Beringer 233 S. Wacker Drive, Suite 4700

	Chicago, IL 60606
Vice President – Treasury	Marc Lenihan 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Vice President – Tax	Marikay Klank 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Assistant Secretary	Joseph Valane 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Assistant Secretary	Annie Wang 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Assistant Secretary	Leslie Robelly 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Assistant Secretary	Lakecia Stanford 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Assistant Secretary	Danielle Sands 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Assistant Secretary	Eric Leaner 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Chief Executive Officer	Kelly Vohs 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Executive Vice President – Operations	Keith Dodds 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Executive Vice President – Finance	Pamela Cain 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606
Chief Information Officer	Paul Hernacki 233 S. Wacker Drive, Suite 4700 Chicago, IL 60606

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "295 107 CIRCLE OWNER 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 FIRST DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "295 107 CIRCLE OWNER LLC" WAS FORMED ON THE FIRST DAY OF MARCH, A.D. 2021.

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



5295575 8300

SR# 20210753800

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202623134

Date: 03-01-21