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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE COST LIMIT ORDER DATE : ORDER TIME : ORDER NO. : CUSTOMER NO: FOREIGN FILINGS NAME: Ox CHEVEL PROPERTY II, LLC QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY \_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: EMITTO 6 -

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 COMPANYTOTRANSACTBUNINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate i	name adopted for the purpose of transacting business in Flo	orida. The altern	ate name must include "Limited Liabi	lity Company," "L.L.C," or "LI	
Delaware		83 3.	3-4060535		
(Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, if applicable)		
Upon Filing					
	(Date first transacted business in Florida, if prior to 1 (See sections 605,0904 & 605,0905, F.S. to determine	egistration ) ne penalty liabil	úy)		
31 West 27th Street,	4th Floor	31	West 27th Street, 4th Flo	oor	
reet Address of Principal Office)		о	(Mailing Address)		
New York, NY 10001		Ne	w York, NY 10001		
	· · · · · · · · · · · · · · · · · · ·				
				7. P	
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acce	ptable)	ELLAHASS	
	Corporation Service Company			SSEE A	
Name:			_	三三	
Office Address:	1201 Hays Street			SEEL FLORIO	
Office Hadress.	Tallahanna			76	
	Tallahassee		32301 Florida		
	(City)		(Zip code)		

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: Frank (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]: Title or Capacity: Name and Address: Name and Address: Title or Capacity: Thomas Leineweber NoHo SPV Holdco II, LLC □ Manager ■ Manager Name: Address: 31 West 27th St., 4th Floor Address: \_\_\_\_ 31 West 27th St., 4th Floor □Member New York, NY 10001 New York, NY 10001 **■**Authorized □ Authorized Person Person □Other \_\_\_ □Other\_\_\_\_ □Other \_\_\_\_ □Other\_ Sean Roberts □Manager ■Manager Name: 31 West 27th St., 4th Floor □Member ☐ Member Address: \_ New York, NY 10001 □ Authorized □ Authorized Person Person Other\_\_\_\_ □Other □Other \_\_\_\_\_ 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 Thomas Leineweber

Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORCHARD PROPERTY II, 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-SIXTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORCHARD PROPERTY II, LLC" WAS FORMED ON THE SIXTH DAY OF FEBRUARY, A.D. 2019.

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

Authentication: 203052767

Date: 04-26-21

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