

6/8/2021

Division of Corporations

Florida Department of State

Division of Corporations

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**Foreign Limited Liability Company  
Ladder Capital Asset Management LLC**

Certificate of Status	0
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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:

1. Ladder Capital Asset Management 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 3. 27-4851783  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Not Applicable.  
(Use first transacted business in Florida, if prior to registration)  
(See sections 605.0931 & 605.0905, F.S. to determine penalty liability)

5. 345 Park Avenue, 8th Floor, NY, NY 10154 6. 345 Park Avenue, 8th Floor, NY, NY 10154  
(Street Address of Principal Office) (Mailing Address)

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

Name: CT Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(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.

By: Kathryn A. Whalton, Asst Secretary  
(Registered agent's signature)

## PLEASE SEE ATTACHED LIST OF AUTHORIZED PERSONS.


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>Series TRS of Ladder Mideo II LLC</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>345 Park Avenue, 8th Floor, NY, NY 10154</u>	<input type="checkbox"/> Member	Address: _____
<input checked="" type="checkbox"/> Authorized	<u>Brian Harris, Chief Executive Officer</u>	<input checked="" type="checkbox"/> Authorized	<u>Pamela McCormack, President</u>
Person	<u>345 Park Avenue, 8th Floor, NY, NY 10154</u>	Person	<u>345 Park Avenue, 8th Floor, NY, NY 10154</u>
<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 checked="" type="checkbox"/> Authorized	<u>Robert Perleman, Managing Director</u>	<input checked="" type="checkbox"/> Authorized	<u>Kelly Porcella, Chief Administrative Officer &amp; General Counsel</u>
Person	<u>345 Park Avenue, 8th Floor, NY, NY 10154</u>	Person	<u>345 Park Avenue, 8th Floor, NY, NY 10154</u>
<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 checked="" type="checkbox"/> Authorized	<u>Paul J. Miceli, Chief Financial Officer</u>	<input checked="" type="checkbox"/> Authorized	<u>Michelle Wallach, Chief Compliance Officer</u>
Person	<u>345 Park Avenue, 8th Floor, NY, NY 10154</u>	Person	<u>345 Park Avenue, 8th Floor, NY, NY 10154</u>
<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

Kelly Porcella, Authorized Person

Typed or printed name of signer

Authorized Persons To Manage

Edward Peterson, Managing Director  
345 Park Avenue, 8<sup>th</sup> Floor, NY, NY 10154

David Traitel, Managing Director  
345 Park Avenue, 8<sup>th</sup> Floor, NY, NY 10154

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# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "LADDER CAPITAL ASSET MANAGEMENT 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 JUNE, A.D. 2021.

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

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DELAWARE, DE



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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 in a small font.

Jeffrey W. Bullock, Secretary of State

Authentication: 203395361

Date: 06-08-21