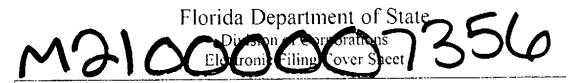
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To:

Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

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Phone: (614)280-3338
Fax Number: (954)208-0845

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

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## Foreign Limited Liability Company HOMETAP INVESTMENT PARTNERS III SPV, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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Help

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

IN COMPILANCE WITH SECTION 8080002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TEMPLED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA Hometap Investment Partners III SPV, LLC !Name of Foreign United Liability Company, must include "Limited Stability Company," "LLC Cor"L(C)" (It name manufable, order afternate name adopted for the paspose of paraseting runders in Florida, The alternate name must mende "familied Linarity Company," "LLC," or "LLC," o characteristic materials as of which tere go bound tability company a organized (Dec. that measured business in Pionics, If prior in registration). (See sections 60x 600x & 703,1800; i.S. in determine perally liability). 800 Boylston St. 16th Flr 800 Boylston St. 16th Flr (Secre Andrew of Company Office) Boston MA 02199 Boston MA 02199 7. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable) C.T. Corporation System Name: 1200 South Pine Island Road Office Address: 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

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.

CT Corporation	on System CYUNTINI VOIC	Christinė Kelm Assistera Secretary					
(Registered agent's september)							

Page: 4 of 5

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:	P.	Title or Capacity:		Name and Address:
⊟lvlanager	Name: Hometap Investment Partners III	<b>4</b> 1	IBManager	Name:	
<b>W</b> Member	Address: 800 Boylston St. 16th Flr		□Nember		
DAuthorized	Boston MA 02199		CiAuthorized		-
Person			Person		
Ci-Other	Cother		[]Other		[]Other
□ Manager	Name:		□Manager	Name:	
⊞Member	Address:		□Member	Address:	
Mathorized			DAuthorized		
Person			Person	·	
□Other	OOther		Other_	F 744	E2Other
©Manager	Name:		□Manager	Name:	
ÜMemba	Address		□Member	Address:	
ClAuthorized	/		☐ Authorized		PP-PP-0 1970-10-1970-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Person			Person		
90ther	i. Other		E)Other		□Other

Important Name: 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 filling 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 outh 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 fellowy as provided for in 8.817.155, F.S.

Signature of an sudfamed servan

Activated State of an authorized servan

Typed or primary same of signee

## Delaware The First State

Page 1

From; Ranae McGra

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

DELAWARE, DO HEREBY CERTIFY "HOMETAP INVESTMENT PARTNERS III SPV,

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 ASSESSED TO DATE.

Authentication: 203396389

Date: 06-08-21