

M21000008351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

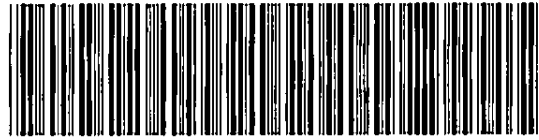
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Handwritten signature and date: 7/1/21

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

ACCOUNT NO. : I20000000195
REFERENCE : 884859 8330054
AUTHORIZATION : *Spuddelean*
COST LIMIT : \$ 130.00

ORDER DATE : June 29, 2021
ORDER TIME : 9:48 AM
ORDER NO. : 884859-005
CUSTOMER NO: 8330054

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FOREIGN FILINGS

NAME: 34 PINE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- _____ CERTIFIED COPY
- XX _____ PLAIN STAMPED COPY
- XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 34 PINE 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:

Lisa Ricciardelli
Name of Person
Aimco
Firm/Company
4582 S. Ulster St. Suite 1450
Address
Denver, CO 80237
City/State and Zip Code
Lisa.Ricciardelli@aimco.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Ricciardelli at (303) 793-4858
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

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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. 34 PINE 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. 87-1436503 (FEI number, if applicable)

4. 6/21/2021 (Date first transacted business in Florida, if prior to registration) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4582 S. Ulster St. Suite 1450 (Street Address of Principal Office)
6. 4582 S. Ulster St. Suite 1450 (Mailing Address)
Denver, CO 80237 Denver, CO 80237

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)

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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: Eyleina Bahar Assistant Vice President
(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:
 Manager Name: AIMCO OP L.P.
 Member Address: 4582 S. Ulster St. Suite 1450
 Authorized Denver, CO 80237
 Person _____
 Other _____ Other _____

Title or Capacity: Name and Address:
 Manager Name: Lisa Ricciardelli
 Member Address: 4582 S. Ulster St. Suite 1450
 Authorized Denver, CO 80237
 Person _____
 Other _____ Other _____

Manager Name: John Nicholson
 Member Address: 4582 S. Ulster St. Suite 1450
 Authorized Denver, CO 80237
 Person _____
 Other _____ Other _____

Manager Name: Jennifer Johnson
 Member Address: 4582 S. Ulster St. Suite 1450
 Authorized Denver, CO 80237
 Person _____
 Other _____ Other _____

Manager Name: Matt Konrad
 Member Address: 4582 S. Ulster St. Suite 1450
 Authorized Denver, CO 80237
 Person _____
 Other _____ Other _____

Manager Name: Lee Hodges
 Member Address: 4582 S. Ulster St. Suite 1450
 Authorized Denver, CO 80237
 Person _____
 Other _____ 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 of 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.

Lisa Ricciardelli
 Signature of an authorized person

Lisa Ricciardelli
 Typed or printed name of signer

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "34 PINE 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-NINTH DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "34 PINE LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JUNE, A.D. 2021.

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

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SECRETARY'S OFFICE
DELAWARE




Jeffrey W. Bullock, Secretary of State

6017049 8300

SR# 20212582467

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203563264

Date: 06-29-21