

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations
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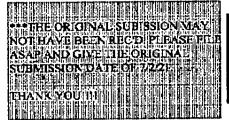
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## Foreign Limited Liability Company LRF2 ORL JUDGE LLC



Certificate of Status	0	
Certified Copy	1	
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oral 2/21

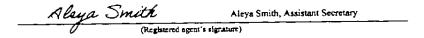
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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: LRF2 ORL JUDGE LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter atternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") (Jurisdiction under the law of which foreign limited liability company is organized) Upon filing (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 116 Huntington Avc., Stc 601 116 Huntington Avc., Stc 601 6. (Mailing Address) (Street Address of Principal Office) Boston, MA 02116 Boston, MA 02116 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hay Street Office Address: 32301 Tallahassee , Florida (City)

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.



of the translator must be submitted)

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Title or Capacity:	Name and Address:	Title or Capacit		Name and Address:
□Manager	Name: Longpoint Realty REIT II LLC	□Manager	Name:	
■Member	Address:	□Member	Address:	
□Authorized	Boston, MA 02116	□Authorized		
Person		Person		
□Other	Other	Other		□Other
				2021 JUI
□Manager	Name:	∏Manager	Name:	<u> </u>
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		PR 19
Person		Person		<u> </u>
Other	Other	□Other	<del></del>	Other
☐ Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address: _	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other	<del></del>	☐ Other

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information

Signature of an authorized person

Typed or printed name of signer

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

/s/ Nilesh Bubna

Nilesh Bubna, Sr. Vice President

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## <u>Delaware</u>

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

DELAWARE, DO HEREBY CERTIFY "LRF2 ORL JUDGE 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 SECOND DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LRF2 ORL JUDGE"
LLC" WAS FORMED ON THE FIRST DAY OF JULY, A.D. 2021.

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

MS(1) 20310100

Authentication: 203591949

Date: 07-02-21

6053950 8300 SR# 20212617571

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