Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210002799553)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 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.

Email Address:_

Foreign Limited Liability Company RAR2 - 250 NW 130TH AVENUE FL, LLC

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

Electronic Filing Menu Corporate Filing Menu

Help

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

IN COMPLANCE WITH SECTION 405,0X02, FLORIDA STATUTEX THE FOLLOWING IS SURVITTED TO REGISTER A FOREGY. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: RAR2 = 250 NW 130th AVENUE FL. 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 maxiness in Florida. The alternate name must mediate "Limited Ladolity Company," "LALC," or "LLC," or "L Delaware (III number if applicable) (Jurisdiction under the law of which foreign limited lightlity company is organized) (Thie first transacted lineares in Florida, if prior to registration.)
(See sections 603-6964 & 605-6905, F.5. to determine penalty liability.) 222 South Riverside Plaza, 34th Floor 222 South Riverside Plaza, 34th Floor (Street Address at Principal Cities) Chicago, IL 60606 Chicago, IL 60606 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:

Plantation

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.

(City)

By: Sandra Zwijack, Assistant Secretary

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 (5) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
_]Manager	Name. RREEF America REIT II, Inc.	_Manager	Name. W. Todd Henderson
≅ Member	Address: 222 South Riverside Plaza, 34th Floor	_Member	Address: 875 3rd Avenue, 26th Floor
□Authorized	Chicago, IL 60606	■ Authorized	New York, New York 10022
Person		Person	
⊡Other	Other	□Other	
□Manager	Name:	□Manager	Name: Viktam Mehra
⊒Meniber	Address: 222 South Riverside Plaza, 34th Floor	□Member	Address: 875 3rd Avenue, 26th Floor
■ . Authorized	Chicago, II. 60606	₹ Authorized	New York, New York 10022
Person		Person	2021 JUL
Other	Other	Other	
⊡Manager	Name: William Swiderski	∐Manager	Portia Guerin
I. Member	Address: 222 South Riverside Plaza, 34th Floor	T.Member	Address: 222 South Riverside Blaza, 34th Floo
■ Authorized	Chicago, IL 60606	 Authorized	Chicago, IL 60606
Person		Person	
- Other	- 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 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 fellowy as provided for in s.817,155, F.S.

Portra	Muin	
	Signature of an authorized person	-
Portia Guerin		
	I see the entire tool recover of signing	

Page: 5 of 5



Page 1

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

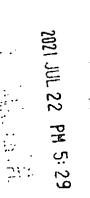
DELAWARE, DO HEREBY CERTIFY "RAR2 - 250 NW 130TH AVENUE FL, LLC" IS

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-FIRST DAY OF JULY, A.D. 2021.

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





Authentication: 203730541

Date: 07-21-21

6097453 8300 SR# 20212766036

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