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.

(((H21000336280 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Ţ	0	;	

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 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:			,		:
			 		= 7	7

Foreign Limited Liability Company SREIT Dadeland TRS, L.L.C.

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

Electronic Filing Menu Corporate Filing Menu

Help

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

IN COMPLEME WITH SIGNON 605,0902. FLORIDA STATUTIN, THE POLLOWING IN SUBMITTED TO REGISTERIA POREKEN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESN IN THE SERTEOF FLORIDA:

(Name of Foreign	Limited Liability Company: must include "Limit	ed Liability Company," "L.L.C.," or "LLC.")	
li name unavailable, onter alternate n	ame adopted for the purpose of transacting business in Fl	orida. The afternate name must motude "Limited Liability	Company.7 "L.L.C." or "LLC."
Delaware		,	
(Jarisdiction uniter the law of w	hich foreign limited liability company is organized)	3. (TEI number, st	poplicable)
	(Date first transacted frusiness in Florida, if prior to (See sections 603 0904 & 603 0905, F.S. to determ	o registration) nine ponally linbility)	_
1601 Washington Aver	nue .	591 West Putnam Avenue	
(Sincer Address of I	*energed (Office)	(Mailing Address)	21
Suite 800		Greenwich, CT 06830	\$
Miami Beach, FL 3313	9		P 10
. Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	PH IZ: IX
Name:	C T Corporation System		w
Office Address:	1200 South Pine Island Road		
	Plantation	33324 , Florida	
	(City)	(Zip code)	_
lesignated in this applica o comply with the provisi	gistered agent and to accept service of tion, I hereby accept the appointment of	process for the above stated limited lia as registered agent and agree to act in a r and complete performance of my dut Estima lemin	this capacity. I further
	By: Katherine Schneider, Asst. Se	cretary	_

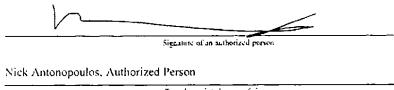
Page: 5 of 6

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:	Title or Capacity:		Name and Address:
Manager	Name: Nick Antonopoulos	Manager Manager	Name:	
Member	Address: 591 West Putnam Avenue	Member	Address:	
⊠Authorized	Greenwich, CT 06830	Authorized		
Person		Person		
Other	Other	Other		Othe:
Manager	Name:	Manager Manager	Name:	
Member	Address:	☐ Member	Address.	
Authorized		Authorized		
Person		Person		
Other	Other	Other		Other
Manager	Name:	Manager	Name:	
Member	Address:	Member	Address:	
Authorized		Authorized		
Person		Person		
☐Other	Other	Other		Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.





Page 1

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

DELAWARE, DO HEREBY CERTIFY "SREIT DADELAND TRS, L.L.C." 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 NINTH DAY OF SEPTEMBER, A.D. 2021.

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

Authentication: 204121268

Date: 09-09-21