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September 15, 2021

EMMA MUETHING & KLEKAMP PLL SUITE 1400, 1 E 4TH STREET CINCINNATI, OH 45202

SUBJECT: 2ND STREET MIAMI GARAGE, LLC

Ref. Number: W21000124880

We have received your document for 2ND STREET MIAMI GARAGE, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 421A00022291

Suzanne Hawkes Regulatory II

www.sunbiz.org

## **COVER LETTER**

TO:

TO:	Registration Section Division of Corporations				
SUBJE	2nd Street Miami Garage, LLC				
	Name of Limited Liability Company				
		y Company for Authorization to Transact Business in Florida," Certificate of e referenced foreign limited liability company to transact business in Florida.			
Please r	return all correspondence concerning this matter	to the following:			
	Emma L. Compton				
		Name of Person			
	Keating Muething & Klekamp PLL				
	Firm/Company				
	Suite 1400, 1 E 4th Street				
	Address				
	Cincinnati, OH 45202	Cincinnati, OH 45202			
		City/State and Zip Code			
	ecompton@kmklaw.com				
	E-mail address: (to	be used for future annual report notification)			
For furt	her information concerning this matter, please of	call:			
	Emma Compton	513 579-6967 at ( )			
	Name of Contact Person	Area Code Daytime Telephone Number			
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DE  \$125.00 Filing Fee \$130.00 Filing F  Certificate	EPARTMENT OF STATE  Fee &   \$155.00 Filing Fee &   \$160.00 Filing Fee, Certificate			

## 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. 2nd Street Miami Gara, (Name of Foreign	Limited Liability Company, must include "Limited	Liabilit	y Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alteresto	name adopted for the purpose of transacting business in Flo	orida. The	alternate name must include "Limited Liability Company," "L.I.C," or "LLC."
Delaware 2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3.	87-2520343 (FEI number, d'applicable)
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determi	registratio no penalty	n.) Liability)
250 East Fifth Street		_	250 East Fifth Street
5. (Street Address of Principal Office)		6.	(Mailing Address)
Suite 2110			Suite 2110
Cincinnati, Ohio 45202	2		Cincinnati, Ohio 45202
7. Name and street addre	ss of Florida registered agent: (P.O. Box	<u>NOT</u>	acceptable)
Name:	CT Corporation System		
Office Address:	1200 South Pine Island Road		
	Plantation		33324
	(City)		, Florida

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.

Nichol McCroy, Assistant Secretary

(Registered access'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: Title or Capacity: Name and Address: Name: MVP REIT II Operating Partnersh P Manuel Chavez III ☐ Manager □ Manager 9130 West Post Road, Suite 200 250 East Fifth Street, Suite 2110 ■ Member □ Mcmber Las Vegas, Nevada 89148 Cincinnati, Ohio 45202 ☐ Authorized M Authorized Person Person ☐ Other ☐ Other □ Other Other\_\_\_\_\_ ☐ Manager Name: □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 8.817.155, F.S.

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

DELAWARE, DO HEREBY CERTIFY "2ND STREET MIAMI GARAGE, 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 SEVENTH DAY OF SEPTEMBER, A.D. 2021.

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

Authentication: 204094550

Date: 09-07-21