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.

(((H210003773393)))



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To:

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. annual report mailings. Enter only one email address please.

Email Address:_

Foreign Limited Liability Company STAR 2021-SFR2 Borrower GP, L.L.C.

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

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

IN COMPLANCE WITH SPLIKON 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Stiffed (Storing Company, mass meaning 12	imited Liability C	ompany, "LLC," or "LLC")			
f earne Gravarlable, enter alternate na	ains adopted for the purpose of transacting business	ex in Florida The alte	dubed battons?" abulgut taum aman ateura	ty Company," *	I. I. C." iv '	Tu um
Delaware		.,				
(Jurisdiction under the law of wh	Jurisd ction under the law of which foreign limited liability company is organized) 3. J FI number, i			(applicable)		_
Upon filing						
	(Pote first transacted bitsiness in Plurida of pr (See sections 605 6908 & 605 0905 F.S. to d	nor to registration) Jetornine penalty lia	bility'y			
591 West Putnam Avenue		5 ¹	591 West Putnam Avenue			
(treet Address at Principal Office)			(Mailing Address)			
Greenwich, CT 06830	3	G	ireenwich, CT 06830	enwich, CT 06830		
						-
		_				_
None and street address	s of Florida registered agent: (P.O.	Box NOT ac	centable)	•	153	
	200,100,000,005,000,000,000,000			T st.		: "
	C T Corporation System				CD	# 12 21
Name) ; , ; ;	_	र् इ
065 511	1200 South Pine Island Road		ري. دريان	AH S	(and	
Office Address			FL TATE	e: 30	Contract of	
	Plantation	, Florida				
	(City)		(Apparale)			
Registered agent's accept	tance: gistered agent and to accept service tion. I hereby accept the appointme ions of all statutes relative to the pr	ent as registere oper and comp	ed agent and agree to act in t	his capacit	v. I furi	her agr
lesignated in this applicat o comply with the provision	s of my position as registered agent	•				
lesignated in this applicated comply with the provisional accept the obligations			Stychouse Honey			

Assistant Secretary

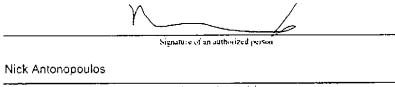
From: Kimberly Laughrey

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 Capacit	<u>y:</u>	Name and Address:	
⊡Manager	Name: STAR 2021-SFR2 Equity Owner	□Manager	Name:		
■ Member	Address:	□Member	Address:		
□Authorized	591 West Putnam Avenue	□ Authorized			
Person	Greenwich, CT 06830	Person			
□Other	Other	⊒Other		□Other	
⊡Manager	Name:	∐Manager	Name:		
⊡Member	Address:	□ Member	Address:		
☐ Authorized		\square Authorized			
Person		Person			
□ Other	Other	□Other		□ Othe1	
□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. 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 felony as provided for in 8.817.155, F.S.



Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "STAR 2021-SFR2 BORROWER GP, 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 EIGHTH DAY OF OCTOBER, A.D. 2021.

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

at som delaware sow/auth

Authentication: 204366011

Date: 10-08-21