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Division of Corporations

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Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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Foreign Limited Liability Company
GV/GC Bradenton Luxor Owner, LLC

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SR

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. GVP/GC Bradenton Luxor Owner, 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 business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC."

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. (EIN number, if applicable)

4. (Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 900 North Michigan Avenue, Suite 1450
(Street Address of Principal Office)
Chicago, Illinois 60611

6. c/o GEM Realty Capital, Inc.
(Mailing Address)
900 North Michigan Avenue, Suite 1
Chicago, Illinois 60611

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C.T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324

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.

By: C.T Corporation System By: Kaity Toon, Asst. Secretary
(Registered agent's signature)

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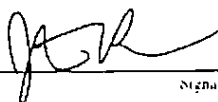
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

| <u>Title or Capacity:</u> | <u>Name and Address:</u> | <u>Title or Capacity:</u> | <u>Name and Address:</u> |
|------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Manager | Name: <u>Dany A. Malkin</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 | <input type="checkbox"/> Manager | Name: <u>Herman S. Geller</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 |
| <input type="checkbox"/> Member | Address: <u>Chicago, IL 60611</u> | <input type="checkbox"/> Member | Address: <u>Chicago, IL 60611</u> |
| <input checked="" type="checkbox"/> Authorized | Signatory | <input checked="" type="checkbox"/> Authorized | Signatory |
| Person | | Person | |
| <input type="checkbox"/> Other | <input type="checkbox"/> Other | <input type="checkbox"/> Other | <input type="checkbox"/> Other |
| | | | |
| <input type="checkbox"/> Manager | Name: <u>Michael A. Elrad</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 | <input type="checkbox"/> Manager | Name: <u>Craig R. Cufficelli</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 |
| <input type="checkbox"/> Member | Address: <u>Chicago, IL 60611</u> | <input type="checkbox"/> Member | Address: <u>Chicago, IL 60611</u> |
| <input checked="" type="checkbox"/> Authorized | Signatory | <input checked="" type="checkbox"/> Authorized | Signatory |
| Person | | Person | |
| <input type="checkbox"/> Other | <input type="checkbox"/> Other | <input type="checkbox"/> Other | <input type="checkbox"/> Other |
| | | | |
| <input type="checkbox"/> Manager | Name: <u>Jonathan C. Romick</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 | <input type="checkbox"/> Manager | Name: <u>Eric Siegel</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 |
| <input type="checkbox"/> Member | Address: <u>Chicago, IL 60611</u> | <input type="checkbox"/> Member | Address: <u>Chicago, IL 60611</u> |
| <input checked="" type="checkbox"/> Authorized | Signatory | <input checked="" type="checkbox"/> Authorized | Signatory |
| Person | | Person | |
| <input type="checkbox"/> Other | <input type="checkbox"/> Other | <input type="checkbox"/> Other | <input type="checkbox"/> 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 s.817.155, F.S.



 Signature of an authorized person

Jonathan C. Romick

 Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GVI/GC BRADENTON LUXOR OWNER, 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-EIGHTH DAY OF SEPTEMBER, A.D. 2021.

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



6261752 8300

SR# 20213369316

You may verify this certificate online at corp.delaware.gov/authver.shtmlA handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204275161

Date: 09-28-21