

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

Please Honor Original
Date 10/18/2021

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: _____

Foreign Limited Liability Company
GVI/GC Bradenton Sunny Acres Owner, LLC

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

2021 OCT 18 PM 1:51
SECRETARY OF STATE
ALLAHASSEE, FLORIDA
APPROVED
AND
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2021 OCT 27 AM 6:45
ALLAHASSEE, FLORIDA

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OCT 28 2021
K. Brumbley

Please Honor Original Date 10/18/2021

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. GVL/C Bradenton Sunny Acres 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 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(First transacted business in Florida, if prior to registration;
See sections 605.0901 & 605.0903, F.S. to determine penalty liability)

5. 900 North Michigan Avenue, Suite 1450 6. c/o GEM Realty Capital, Inc.
(Street Address of Principal Office) (Mailing Address)
Chicago, Illinois 60611 900 North Michigan Avenue, Suite 1450
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 33324
(City) Florida (Zip code)

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 Kaity Toon by Kaity Toon, Asst. Sect.
(Registered agent's signature)

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TALLAHASSEE, FLORIDA


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>Darcy A. Maffin</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 Chicago, IL 60611	<input type="checkbox"/> Manager	Name: <u>Herman S. Geller</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 Chicago, IL 60611
<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 <u></u>	<input checked="" type="checkbox"/> Authorized	Signatory <u></u>
Person <u></u>		Person <u></u>	
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>
<input type="checkbox"/> Manager	Name: <u>Michael A. Elrad</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 Chicago, IL 60611	<input type="checkbox"/> Manager	Name: <u>Craig R. Catarella</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 Chicago, IL 60611
<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 <u></u>	<input checked="" type="checkbox"/> Authorized	Signatory <u></u>
Person <u></u>		Person <u></u>	
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>
<input type="checkbox"/> Manager	Name: <u>Jonathan C. Romick</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 Chicago, IL 60611	<input type="checkbox"/> Manager	Name: <u>Eric Siegel</u> c/o GEM Realty Capital, Inc. 900 North Michigan Avenue, Suite 1450 Chicago, IL 60611
<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 <u></u>	<input checked="" type="checkbox"/> Authorized	Signatory <u></u>
Person <u></u>		Person <u></u>	
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>

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 § 817.135, F.S.



 Signature of an authorized person
 Jonathan C. Romick

 Typed or printed name of signer

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GVI/GC BRADENTON SUNNY ACRES 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.



6261756 8300

SR# 20213369317

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204275163

Date: 09-28-21