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S. ROBERTS DEC 1 6 2021

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 334068 8312826

AUTHORIZATION :

COST LIMIT : \$\int \frac{1}{25} \tag{00}

ORDER DATE: December 16, 2021

ORDER TIME : 2:05 PM

ORDER NO. : 334068-010

CUSTOMER NO: 8312826

\_\_\_\_\_

### FOREIGN FILINGS

NAME: BR 79 WEST LEASECO, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

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

IN COMPILANCE WITH SECTION 005,0002, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BR 79 West Leaseco			
(Name of Foreign	Limited Liability Company; must include "Limited	d Liability Company," "L L.C.," or "LLC.")	_
(If name unavailable, enter alternate i	name adopted for the purpose of transacting business in Fl	lorida. The alternate name must include "Limited Liability Company," "L.L.C," or "	ī.l.C.")
Delaware 2.		87-3767999 3	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. (FEI number, if applicable)	_
Upon Qualification			
,	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration ) ine penalty liability)	
1345 Avenue of the Americas 5		27777 Franklin Road 6.	
Street Address of Principal Office)		6. (Mailing Address)	-
32nd Floor, Suite B		Suite 900	
New York, NY 10105	· · · · · · · · · · · · · · · · · · ·	Southfield, MI 48034 S D D C S D D D D D D D D D D D D D D D	- - <del></del>
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	E
Name:	Corporation Service Company	AM II: IL	g g gant Sugn
Office Address:	1201 Hays Street	' m	
	Tallahassee	32301 , Florida	
	(City)	(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.

Corporation Service Company

By: Ulum Vibra assistant va president

(Registered agent'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: Title or Capacity: Name and Address: Name and Address: Name: Caroline Johnson Name: \_\_\_\_\_ Ruddy □Manager □Manager 1345 6th Avenue 27777 Franklin Road Address: Address: □ Member □Member Suite 900 32nd Floor, Suite B Authorized Authorized Southfield, MI 48034 New York, NY 10105 Person Person Other\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_\_ Other\_\_\_ □Manager □Manager Name: Name: \_\_\_\_\_ □Member Address: □Member Address: \_\_\_\_\_ □ Authorized □ Authorized Person Person □Other\_\_\_\_ □Other Other\_\_\_\_ □Other\_\_\_\_\_ □Manager Name: □Manager Name: \_\_\_\_\_ □Member Address: \_\_\_\_ Address: ☐ Member □ Authorized □ Authorized Person Person

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.

□Other\_\_\_\_\_

□Other\_\_\_\_\_

□Other\_\_\_\_\_

□Other\_\_\_\_

- 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.

Mala		
	Signature of an authorized person	
Jordan Ruddy		
Exped or printed name of signer		

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BR 79 WEST LEASECO, 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 SIXTEENTH DAY OF DECEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BR 79 WEST LEASECO, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF NOVEMBER, A.D. 2021.

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



Authentication: 204997476

Date: 12-16-21