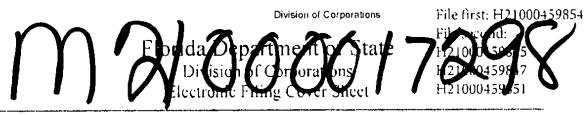
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## Foreign Limited Liability Company TBR SFR Orlando Owner GP, L.L.C.

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UEC \_ = 2021

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTEX, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF 11 ORIDA:

1. TBR SFR Orlando Owi	ner GP, L.L.C Limited Lightity Company; uma include "Limited	Tabilia Ca	want of the same			
(Name of Foreign	элинен гавингу Сонфайх, ишас тетос санисы	ramin's Cor	прину 1.1.С, от г.с. 3			
(Il name unavailable, enter alternate o	ainer adopted for the purpose of transacting business in Flo	redu. I tic altern	ate name most include "familied I is	lobty Company," "i.	Ī.C," (#	MJ C N
Delaware 2.		-2				
(Jurisdiction under the taw of which foreign timited liability company is organized)		3	() (il numbar, if applicable)			
Upon filing						
	(Date first transported bitsiness in Flanda, if print to ) (See sections 663-6904 & 665-6905, F.S. to determine	egistration ) ne penalty habit	.15}	· <del></del>		
591 West Putnam Aver	nue		West Putnam Avenue			
5. (Street Address of Pontagad Office)		Ü	(Mailies Address)			<del></del>
Greenwich, CT 96830		Gre	enwich, CT 06830			
	<del></del>			<del></del>		_
				·	27	_
				- 1		
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT acce	prable)		·.	. 1
Name:	C T Corporation System			:4. 24.	7 PM	<u> </u>
Office Address:	1200 South Pine Island Road			STATE S.FL	2: 28	
	Plantation		33324 , Florida			
	(City)		(Ap code)			
designated in this applica to comply with the provisi	tance: gistered agent and to accept service of p tion, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent.	registereo	l agent and agree to act i	n this capacity	: I fui	ther agre
1	CT Corporation System Sy. Katherine Schneider, Asst. Secretary	,	Kalinia, Schnider			

To: +18506176383+

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: TBR SFR Parent Holdings, L.P. Name: \_\_\_\_\_\_ □ Manager ... Manager **⊠** Member Member Address: \_\_\_\_\_ Address: \_\_\_\_\_ 591 West Putnam Avenue ☐ Authorized  $\square$  Authorized Greenwich, CT 06830 Person Person □Other\_\_\_\_ □Other \_\_Other\_\_\_\_\_ Cother\_\_\_\_ Name \_\_\_\_\_ Name: \_\_\_\_\_\_ ∐Manager Address: □Member Address: Authorized □ Authorized Person Person □Other\_ \_\_\_\_ □Other\_\_\_\_\_ \_\_Other\_\_\_\_ □ Other \_\_\_\_\_ Name: Name: 🗌 Manager □ Manager □ Member Address: ☐ Member Address: \_\_\_\_ Authorized □ Authorized Person Person \_\_\_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, 1 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. Stenature of an authorized person Nick Antonopoulos, Authorized Signatory

Typed or printed name of signee



Page 1

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

DELAWARE, DO HEREBY CERTIFY "TBR SFR ORLANDO OWNER 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 SIXTEENTH DAY OF DECEMBER, A.D. 2021.

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

6468044 8300

SR# 20214127881

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

Seffrey W. Budiace, Secretary of State

Authentication: 205007834

Date: 12-16-21