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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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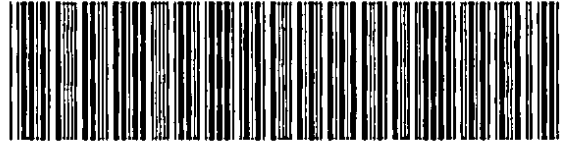
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S. FRANKLIN

JAN 22 2022

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CCP Brokerage Investments LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Douglas Ebenstein
Name of Person

CCP Brokerage Investments LLC
Firm/Company

6111 Broken Sound Pkwy., Ste 310
Address

Boca Raton FL 33487
City/State and Zip Code

geddy@capcomp100.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Graham Eddy at (703) 804-4600
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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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. CCP Brokerage Investments 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. 87-3704445
(FBI 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. 6111 Broken Sound Pkwy.
(Street Address of Principal Office)

Ste 310

Boca Raton FL 33487

6. 6111 Broken Sound Pkwy
(Mailing Address)

Ste 310

Boca Raton FL 33487

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

Name:

Lisa Ebenstein

Office Address:

6111 Broken Sound Pkwy Ste. 310

Boca Raton

(City)

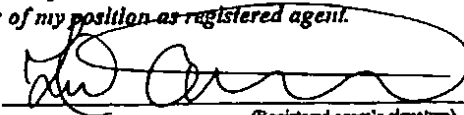
, Florida

33487

(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.



(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>Capital Commercial Properties, Inc.</u>	<input checked="" type="checkbox"/> Manager	Name:	<u>Douglas Ebenstein</u>		
<input checked="" type="checkbox"/> Member	Address:	<u>6111 Broken Sound Pkwy</u>	<input type="checkbox"/> Member	Address:	<u>6111 Broken Sound Pkwy</u>		
<input type="checkbox"/> Authorized		<u>Ste 310</u>	<input type="checkbox"/> Authorized		<u>Ste 310</u>		
Person		<u>Boca Raton FL 33487</u>	Person		<u>Boca Raton FL 33487</u>		
<input type="checkbox"/> Other			<input type="checkbox"/> Other				
<input type="checkbox"/> Manager	Name:	<u>Lisa Ebenstein</u>	<input type="checkbox"/> Manager	Name:	<u>Alan Frank</u>		
<input type="checkbox"/> Member	Address:	<u>6111 Broken Sound Pkwy.</u>	<input type="checkbox"/> Member	Address:	<u>3018 Javier Road</u>		
<input checked="" type="checkbox"/> Authorized		<u>Ste 310</u>	<input checked="" type="checkbox"/> Authorized		<u>Ste 208</u>		
Person		<u>Boca Raton FL 33487</u>	Person		<u>Fairfax VA 22031</u>		
<input type="checkbox"/> Other			<input type="checkbox"/> Other				
<input type="checkbox"/> Manager	Name:	<u>Graham Eddy</u>	<input type="checkbox"/> Manager	Name:			
<input type="checkbox"/> Member	Address:	<u>3018 Javier Road.</u>	<input type="checkbox"/> Member	Address:			
<input checked="" type="checkbox"/> Authorized		<u>Ste 208</u>	<input type="checkbox"/> Authorized				
Person		<u>Fairfax VA 22031</u>	Person				
<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.

Graham E Eddy
Signature of an authorized person

Graham E Eddy
Typed or printed name of signer

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CCP BROKERAGE INVESTMENTS 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 THIRTEENTH DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CCP BROKERAGE INVESTMENTS LLC" WAS FORMED ON THE EIGHTEENTH DAY OF OCTOBER, A.D. 2021.

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

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ELECTRONIC
FALLMOUNTAIN




Jeffrey W. Bullock, Secretary of State

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SR# 20214230836

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

Authentication: 202387299

Date: 01-13-22