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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 429201 8315113

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: January 24, 2022

ORDER TIME : 9:51 AM

ORDER NO. : 429201-005

CUSTOMER NO: 8315113

FOREIGN FILINGS

NAME: AMHERST GROUP PROPERTIES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

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 605.0002. FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Amherst Group Proper	ties, LLC					
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability Company, ""I.	L.C.," or "I.I.C.")	-		
(It name unavailable, enter alternate i	name adopted for the purpose of transacting business in F	orida. The alternate name im	ust include "Limited Liabili	ty Company," "L.L.C," or "LLC,")		
Delaware		2				
2. (Jurisdiction under the law of which foreign limited liability company is organized)		3	(FEI number, 19	(FEI number, if applicable)		
4.						
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ	registration) ine penalty liability)		_		
5001 Plaza on the Lak	e. Suite 200	Same		2022 JAH 25		
5. (Street Address of Principal Office)		6. (Mading /	• + I			
(Street Address of Principal Office)		(Stating)	vodress)	7		
Austin, TX 78746				25 7		
						
				O T		
				2:31 EC.F.L.		
7. Norma and street address	ss of Florida registered agent: (P.O. Box	NOT againtable)				
7. Name and street addres	ss of Piorida registered agent: (P.O. Box	NOT acceptable)				
Name:	Corporation Service Company					
Office Address:	1201 Hays Street					
	Tallahassee	, Flor	32301 rida			
	(Cny)		(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 arent 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:	Name and Address:	Title or Capacity	<u>::</u>	Name and Address:
□Manager	Name: Amherst Group Investments, LLC	□Manager	Name:	
■Member	Address: 5001 Plaza on the Lake	□Member	Address:	. <u>-</u>
□Authorized	Suite 200	□Authorized		
Person	Austin, TX 78746	Person		
Other	Other	Other		□Other
□Manager	Name: Victoria R. Husband	□Manager	Name:	
□Member	Address:	□Member	Address:	
■Authorized	Suite 200	□Authorized		
Person	Austin, TX 78746	Person		2022 JAH
□Other	Other	□Other		□Other 25
□Manager	Name:	□Manager	Name:	PH 2
□Member	Address:	□Member	Address:	72 20
□Authorized		□Authorized		
Person		Person		
□Other	Other	Other		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.

Victoria Husband		
	Signature of an authorized person	
Victoria R. Husband		
	Typed or printed name of signee	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "AMHERST GROUP PROPERTIES, 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-FOURTH DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMHERST GROUP PROPERTIES, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2021.

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

2022 JAN 25 PH 2: 31

Authentication: 202465361

Date: 01-24-22