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	Fax Number	: (850)617-6383	
From:			
	Account Name	: CORPORATE CREATIONS INTERNATIONAL INC.	
	Account Number	: 110432003053	
	Phone	: (561)694-8107	2022 SEC
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Foreign Limited Liability Company SVAP III CORAL LANDINGS, LLC

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2022 HAR 31 P.412: 03

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: SVAP HE CORAL LANDINGS, 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 "14.C,") Delaware (FEI number, if applicable) (hiradiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration)
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 302 Datura Street, Suite 100 302 Datura Street, Suite 100 (Mailing Address) 5. (Street Address of Principal Office) West Palm Beach, FL 33401 West Palm Beach, FL 33401 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) TSO Agent Services, LLC Name: 302 Datura Street, Suite 100 Office Address: West Palm Beach , Florida 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: Gregory S. Moross, as Manager of TSO Agent Services, LLC

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:	Name and Address:
□Manager	Name: Sterling Value Add Investments III, LLC	□Manager	Name:
≅ Member	Address: 302 Datura Street, Suite 100	□Member	Address:
□Authorized	West Palm Beach, FL 33401	□Authorized	
Person		Person	
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□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.

Nina D. Finn, as Authorized Person

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SVAP III CORAL LANDINGS, 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 THIRTY-FIRST DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SVAP III CORAL LANDINGS, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF MARCH, A.D. 2022.

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

at com delaware gov/auti

Authentication: 203058983

Date: 03-31-22

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