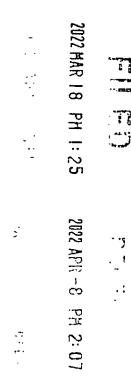
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THE MARQ AT 811 LLC

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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 POLLOWING IS SUBMITTED TO REGISTER A POREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: The MARQ at 811 LLC (Name of Foreign Limited Lightlity Company; must melade "Limited Lightlity Company," "L.L.C.," or "LLC.") (If mems unevallable, onter alternate name adopted for the purpose of transacting business in Florids. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction 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) c/o Robbins Property Associates LLC c/o Robbins Property Associates LLC (Street Address of Principal Office) 120 Wells Avenue 120 Wells Avenue Newton, MA 02459 Newton, MA 02459 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agent Solutions, Inc. Name: Office Address: 155 Office Plaza Drive, Suite A Tallahassee , 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.

/s/ Kristin Pearlstein, Assistant Secretary

(Resistered 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: Name and Address: Title or Capacity: Name and Address; The MARQ at 811 Investors LLC □ Manager □Manager Name: c/o Robbins Property Associates Member Address: □Member Address: 120 Wells Avenue ☐ Authorized □ Authorized Newton, MA 02459 Person Person Other_____ Other_ □ Other_____ ☐Other_ Name: _____ □ Manager Name: □ Manager ☐ Member □ Member Address: Address: ☐ Authorized ☐ Authorized Person Person □ Other ____ ☐ Other ☐ Other ☐ Other Name: _____ □ Manager □ Manager Name: _____ Address: ☐ Member Address: ☐ Member □ 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. 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. nature of the authorized person Steven R. Robbins, Authorized Person Typed or printed name of signes

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "THE MARQ AT 811 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-NINTH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE MARQ AT 811 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.

2022 MAR 18 PM 1: 25

Authentication: 203034198

Date: 03-29-22

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