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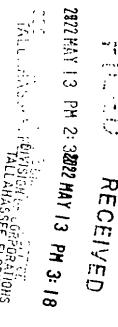
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Special Instructions to	Filing Officer:				
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S. ROBERTS MAY 1 3 2022 DATE: 5/13/22

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED QUALIFICATION FOR:

1. BRICKELL DIP 1, LLC

PLEASE RETURN A CERTIFIED COPY

CHECK# 9263 FOR: \$155.00

THANK YOU!

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

BRICKELL DIP 1, I (Name of Foreign I	Limited Liability Company; must include "Limited	Liability Co	mpany,""LLC,	" or "LLC ")			-
N/A							_
name ausvailable, enter alternate in	ome adopted for the purpose of transacting business in Fig.	wida The alter	nate name must meh	ide "Limited Lisbili	ty Сопірапу," "I	L C," or "	'LLC.'')
DELAWARE		3	N/A			<u>-</u> .	_
(Jurisdiction mider the law of wh	ich foreign luitted liability company is organized)			(FEI number, it	(applicable)		
N/A							
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determine	registration) ne penalty liab	dity)				
8950 S.W. 74th CT., reer Address of Principal Office)	SUITE 1901	6. <u>8</u>	OSO S.W. 74th (Mailing Address	CT., SUITE 1	901		_
MIAMI, FL 33156		1	MIAMI, FL 3:	3156			_
Name and street addres	s of Florida registered agent: (P.O. Box	NOT acc	eptable)			2822 HAY	cse ,
Name:	ATRIUM REGISTERED AGENTS, I	NC.			40.8%	ည P	
Office Address:	8950 S.W. 74th CT., SUITE 1901					PM 2:3	 Ł.,
	MIAMI	.=.=,	, Florida	33156 (Zip code)	, r.,	25	
	(Cny)			(vib cone)			

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.

ALFREDO R. TAMAYO, VICE PRESIDENT

(Registered 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: Name: MIROSLAV SCHOPOFF □Manager Name: _____ XI Manager Address: 8950 S.W. 74th CT. Address: □Member □Member **SUITE 1901** □ Authorized □ Authorized MIAMI, FL 33156 Person Person □Other_____ Other____ Other____ Other Name: ______ Name: ☐Manager □Manager ☐Member Address: Address: □Member □ Authorized ☐ Authorized Person Person □ Other_____ Other _____ _____Other_____ Other Name: _____ Name: _____ □Manager □Manager Address: □Member ☐ 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. 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. Signature of an authorized person ALFREDO R. TAMAYO, ESQ.

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BRICKELL DIP 1, 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 TWELFTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRICKELL DIP 1, LLC" WAS FORMED ON THE THIRD DAY OF MAY, A.D. 2022.

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

Authentication: 203415408

Date: 05-12-22