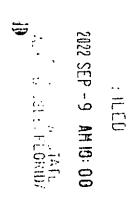
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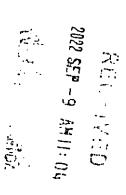
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Name:	CCP HEF	RON LANDING JV	LLC	
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COVER LETTER

то:		ation Section n of Corporations			
SUBJE		P Heron Landing JV LLC			
			Name of Limited Liability Company		
			ility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida.		
Please r	eturn all	correspondence concerning this ma	atter to the following:		
		Osvaldo F. Torres			
			Name of Person		
		Torres Law, P.A.			
			Firm/Company		
		te 400			
	Address				
		Fort Lauderdale, Florida 33316			
			City/State and Zip Code		
		ozzie@torreslaw.net			
	-	E-mail address: ((to be used for future annual report notification)		
For furth	her infor	mation concerning this matter, pleas	se call:		
	Osvald	o F. Torres	754 300-5815		
		Name of Contact Person	Area Code Daytime Telephone Number		
	Regist Division P.O. B	Address: ration Section on of Corporations sox 6327 assec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	Please i	d is a check for the following amounake check payable to: FLORIDA i.00 Filing Fee S130.00 Filing Certific	DEPARTMENT OF STATE		

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 TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

l'name unavailable, enter alternate	name adopted for the purpose of transacting business in Flor	rida. The alternate i	name must include "Limited Liability Company," "L.L.(.," or "1,1,0
Delaware		2		
(Jurisdiction under the law of w	hich foreign limited hability company is organized)	.s	(Fl21 number, if applicable)	
	D. E			
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determine	e penalty liability)		
3480 Main Highway				
reet Address of Principal Office)		6	Mailing Address)	
Suite 302				
Miami, Florida 33133			282	
			SET	
Name and street address	ss of Florida registered agent: (P.O. Box	NOT accepta	able)	; iLt
Name and street address Name:	SS of Florida registered agent: (P.O. Box Torres Law, P.A.	<u>NOT</u> accepta	able)	; iLFU
			able)	i LEU
Name:	Torres Law, P.A. 888 Southeast Third Avenue, Suite 400 Fort Lauderdale		33316	; iLEU
Name:	Torres Law, P.A. 888 Southeast Third Avenue, Suite 400		33316	;)LEU

(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: CCP Heron Landing GP LLC ■ Manager □Manager Name: _____ Address: 3480 Main Highway □Member □Member Address: _____ Suite 302 □ Authorized ☐ Authorized Miami, Florida 33133 Person Person □Other____ □Other____ Other_____ □Other____ Name: ______ □Manager Name: _____ □ Manager Address: □ Member Address: ☐ Member ☐ Authorized □ Authorized Person Person Other____ Other_____ □Other_____ Other_____ Name: Name: _____ □Manager □Manager Address: □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. /s/ Todd P. Linden Signature of an authorized person Todd P. Linden

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 "CCP HERON LANDING JV 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 EIGHTH DAY OF SEPTEMBER, A.D. 2022.

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

Authentication: 204346998

Date: 09-08-22

7006032 8300 SR# 20223476300