(Requestor's Name)
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 976201 7267768								
AUTHORIZATION: Spelle le rea								
COST LIMIT : \$ 125.00								
	_							
September 27, 2022								
10:01 AM								
976201-015								
7267768								
FOREIGN FILINGS								
ORCHARD HOMES V, LLC								
	REFERENCE : 976201 7267768  AUTHORIZATION : Spelle Reas  COST LIMIT : \$ 125.00  September 27, 2022  10:01 AM  976201-015  7267768  FOREIGN FILINGS							

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

#### **COVER LETTER**

TO:	Registration Section Division of Corporations	
	Orchard Homes V, LLC	
SUBJ	ECT:	
		ame of Limited Liability Company
		ity Company for Authorization to Transact Business in Florida," Certificate of ve referenced foreign limited liability company to transact business in Florida
Please	return all correspondence concerning this matter	er to the following:
	Thomas Leineweber	
		Name of Person
	Orchard Homes V, LLC	
		Firm/Company
	195 Broadway, 26th Floor	
	<del></del>	Address
	New York, NY 10007	
	legal@orchard.com	City/State and Zip Code
	E-mail address: (to	be used for future annual report notification)
For fu	rther information concerning this matter, please	call:
	Joseph Mignone	646 414-6792
	Name of Contact Person	Area Code Daytime Telephone Number
	Mailing Address:	Street Address:
Registration Section Division of Corporations		Registration Section Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount Please make check payable to: F1.ORIDA D  S125.00 Filing Fee S130.00 Filing Certificat	EPARTMENT OF STATE

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Name of Foreign	Limited Liability Company; must include "Limite	d Liabilit	v Company," "L.L.C.," or "LLC.")	
			y company, 1020, in time.	
1.11	name adopted for the purpose of transacting business in F	14.01.1.77		291102 91
	name adopted for the purpose of transacting outliness in r	ionda inc	88-3628896	npany, T.L.C., of the
Delaware		3		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	٥,	(Fl:I number, if appli	cable)
N/A				
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registratio	1) liability)	
105 Department Octo				
195 Broadway, 26th	Floor	6.	195 Broadway, 26th Floor (Mailing Address)	
et Address of Principal Office)			(Mailing Address)	
New York, NY 10007	,		New York, NY 10007	<b>6</b> 3
	<del></del>			<del></del>
				တိ
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT	acceptable)	B
				15.
	Corporation Service Company			 (ည
Name:				ယ
	1201 Hays Street			
Office Address:				
	Tallahassee		32301	
	i diidi id5566		. Florida	
	(City)		(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.

Corporation Service Company

By:

(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): Name and Address:
Orchard Properties SPV Holdco V, LLC Title or Capacity: Title or Capacity: Name and Address: □Manager Name: □Manager Name: 195 Broadway, 26th Floor **■**Member □Member Address: New York, NY 10007 ☐ Authorized □ Authorized Person Person □Other\_\_\_\_ □Other \_\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_ □Manager □Manager Name: Name: \_\_\_\_\_ □Member Address: Address: □Member □ Authorized □ Authorized Person Person □Other\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_ Other\_\_\_\_ Name: \_\_\_\_\_ Name: ■ Manager □ Manager □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. 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 Thomas Leineweber Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Orchard Homes V, LLC (file number 804676518), a Domestic Limited Liability Company (LLC), was filed in this office on July 28, 2022.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 27, 2022.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State