## Florida Department of State Division of Corpolation

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000057993 3)))



H240000579933ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

epoailse@pccpllc.com Email Address:\_

## Foreign Limited Liability Company OVERLOOK APARTMENTS OWNER, LLC

Certificate of Status	0
Certified Copy	<u>l</u>
Page Count	04
Estimated Charge	\$1,210.00

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

IN COMPLIANCE WITH SECTION (45,002, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY/TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate	name adopted for the purpose of transacting business in the	orda. The alternate name torist include "Egnater Erability Company," "E.I.	.C. orTEC		
Delaware		,			
(Jurisdiction under the low of which foreign limited liability company is organized)		(i FI number, it applicable)			
10/29/2020 I.					
	(Date that transacted business in Honda, if prior to (See sections 605 600) A 605 0005, U.S. to determine	egistration ) se secualty hability (			
10100 Santa Monica Blvd., Suite 1000 5. Street Address of Principal Office)		6. (Mailing Address)			
. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	NOT acceptable)			
	ss of Florida registered agent: (P.O. Box  C T Corporation System	NOT acceptable)	2024		
Name and <u>street address</u> Name:  Office Address:		<b>8</b>	2024 FEB 17		
Name:	C T Corporation System  1200 South Pine Island Road		2024 FEB 12 AH		
Name:	C T Corporation System  1200 South Pine Island Road	<b>多</b> 	2024 FEB 12 AH 3:		
Name: Office Address: Registered agent's acceptaving been named as releasing to the provision of the provisi	C T Corporation System  1200 South Pine Island Road  Plantation  (Cay)  stance: egistered agent and to accept service of ption. I hereby accept the appointment as		Sat the pla		

From: Kaity Toon

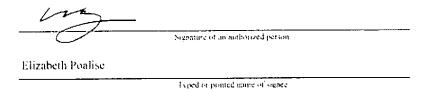
Page: 4 of 6

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 Canacity:	Name and Address: Overlook Apartments	Title or Capacity	<u> </u>	Name and Address:
□Manager	Name: Investor Holdings, LLC	□ Manager	Name:	
■Member	Address:	□ Member	Address:	
□Authorized	10100 Santa Monica Blvd, Suite 1000	☐ Authorized		
Person	Los Angeles, CA 90067	Person	<del></del>	
□Other	Other			[]Other
□Manager	Name:	∏Manager	Name:	
□Member	Address:	☐ Member	Address:	
□Authorized		☐ Authorized		
Person		Person		
□Other		□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		☐ Authorized		
Person		Person	-	
□Other	Qther	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 filling 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 translation 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 \$.817.155, F.S.



## **Overlook Apartments Owner, LLC**

10100 Santa Monica Blvd., Suite 1000 Los Angeles, CA 90067

Overlook Apartments Owner, LLC, a Delaware limited liability company with Doc ID M20000010123 (the "Company"), filed articles of dissolution with the Florida Department of State on January 10, 2024. The Company has no intention of revoking the dissolution, therefore, releasing the name for use to another entity, and hereby consents to Overlook Apartments Owner, LLC, a Delaware limited liability company, using the name "Overlook Apartments Owner, LLC" when registering with the Florida Department of State.

Name: Elizabeth Poalise
Title: Authorized Signor



Page 1

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

DELAWARE, DO HEREBY CERTIFY "OVERLOOK APARTMENTS OWNER, 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 SEVENTH DAY OF FEBRUARY, A.D. 2024.

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



JOFFREY HE FLUTIONING SECURITY OF STATE

Authentication: 202762514