

7/31/24, 1:25 PM

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C I CORPORATION SYSTEM
Account Number : FCA888800023
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.**

Email Address: domum@bulltick.com

Foreign Limited Liability Company Domum Real Estate Ventures LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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Corporate Filing Menu

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Domum Real Estate Ventures LLC
(Name of Foreign Limited Liability Company must include "Limited Liability Company," "LLC," or "LLC")

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC."

2. Delaware 3. 84-5927612
(Jurisdiction under the law of which foreign limited liability company is organized) (EIN number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0911 & 605.0912, F.S., to determine penalty liability)

5. 333 SE 2nd Avenue, Suite 3950 6. 333 SE 2nd Avenue, Suite 3950
(Street Address of Principal Office) (Mailing Address)
Miami, FL 33131 Miami, FL 33131

7. Name and street address of Florida registered agent (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation 33324
City Florida Zip code

2024 JUL 31 PM 2:01

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.

By: C T Corporation System Katty Toon Katty Toon, Asst. Secretary
(Registered agent's signature)

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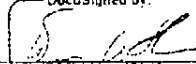
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>Kristin Dacey</u>	☒ Manager	Name: <u>William A Herrera</u>
☐ Member	Address: <u>333 SE 2nd Avenue</u>	☐ Member	Address: <u>333 SE 2nd Avenue</u>
☒ Authorized	Suite <u>3950</u>	☐ Authorized	Suite <u>3950</u>
Person	<u>Miami, FL 33131</u>	Person	<u>Miami, FL 33131</u>
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: <u>Juan Camilo Rojas</u>	☒ Manager	Name: <u>Adolfo del Cuetio</u>
☐ Member	Address: <u>333 SE 2nd Avenue</u>	☐ Member	Address: <u>333 SE 2nd Avenue</u>
☒ Authorized	Suite <u>3950</u>	☐ Authorized	Suite <u>3950</u>
Person	<u>Miami, FL 33131</u>	Person	<u>Miami, FL 33131</u>
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☒ Manager	Name: <u>Humberto Bancelos</u>	☐ Manager	Name: _____
☐ Member	Address: <u>333 SE 2nd Avenue</u>	☐ Member	Address: _____
☐ Authorized	Suite <u>3950</u>	☐ Authorized	Suite _____
Person	<u>Miami, FL 33131</u>	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. Non-indexed 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.

DocuSigned by:

 Signature of 19548277645 person

William A Herrera

Typed or printed name of signer

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "DOMUM REAL ESTATE VENTURES 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 THIRTIETH DAY OF JULY, A.D. 2024.

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



7704269 8300

SR# 20243274395

You may verify this certificate online at: corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204045081

Date: 07-30-24