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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 : (855)498-5500 Fax Number : (800)432-3622

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

Email Address:

Foreign Limited Liability Company HALSTON WATERLEIGH BORROWER, LLC

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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Halston Waterleigh Borrower, LLC					
2, 2, 250, 0	Name of Limited Liability Company					
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of the ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.					
Please	eturn all correspondence concerning this matter to the following:					
	Brittany Smith					
	Name of Person					
	VB Law					
	Firm/Company					
	5302 La Branch Street					
	Address					
	Houston, Texas 77004					
	City/State and Zip Code					
	brittany@vblawoftice.com					
	E-mail address: (to be used for future annual report notification)					
For furt	ner information concerning this matter, please call:					
	Brittany Smith 713 526-9800 at ()					
	Name of Contact Person Area Code Daytime Telephone Number					
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle Tallahassee, Fl. 32301					
Enclose	is a check for the following amount:					
	\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certified Copy \$160.00 Filing Fee, Certificate of Status Certified Copy					

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

IN COMPLIANCE WITH SECTION 6/5/0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	Limited Liability Company; must include "Limit	ed Liability	Company," "L.L.C.," or "LLC.")	
frame mavailable, enter alternate n	name adopted for the purpose of transacting business in Fl	orida. The all	terrate name must include "Limited Liability Comp	any," "L.L.C," or "LLC.")
Delaware (harisdiction under the law of w	tisch foreign limited liability company is organized)	3.	(FEI number, if spplik	:able)
	(Date first transacted histories) in Florida, if prior to (See sections 605,0944 & 605,0905, F.S. to determ	registration, sine penalty l) iability)	
461 Fifth Avenue, Flo		6.	461 Fifth Avenue, Floor 16	
(Street Address of)	'rincipal Office)	***	(Mailing Address)	
New York, New York	10017		New York, New York 10017	24 🌉
Name and street address	ss of Florida registered agent: (P.O. Box	NOT a	ccentable)	
(varie and <u>street andres</u>	of Profita registered agent. (1 x7. 1777)	· <u>.•() 1</u> a	cccjnaoicj	∏
Name:	Capitol Corporate Services, Inc.			<u>=</u>
Office Address:	515 E. Park Ave., Floor 2			
	Tallahassee		32301 , Florida	
	(Cuy)		(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.

Kim Tadlock, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

Title or Capacity:	Name and Address:
CEO	Frank Roessler
	461 Fifth Avenue, Floor 16
	New York, New York 10017
e attachments if necessary)	
·	
	, no more than 90 days old, duly authenticated by the official having custody of records in sorgunized. (If the certificate is in a foreign language, a translation of the certificate under
	rdance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information nent of State constitutes a third degree felony as provided for in s.817.155, F.S.
0	That Bendan
	Signature of an authorized person

Typed or printed name of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "HALSTON WATERLEIGH BORROWER, 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 THIRTEENTH DAY OF AUGUST, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HALSTON
WATERLEIGH BORROWER, LLC" WAS FORMED ON THE FIFTEENTH DAY OF MAY,
A.D. 2024.

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

e at corp.delaware.gov/authy

Authentication: 204149956

Date: 08-13-24

3686387 8300

SR# 20243401098

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