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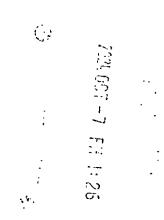
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: URB REAL ESTATE LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Eugenia Garcia Olea Name of Person	
Name of Person	
URB Real Estate LLC Firm/Company	
Firm/Company	
5008 Starfish Dr SE, unit F	
Address	
St. Petersburg, Florida, 33705	
City/State and Zip Code	
bod P wholevelooments com	
bpd @ urbdevelop ments. com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Tot forther intermation concerning this matter, prease call.	
Evgenia Garcia Olea at (727) 666-5281 Name of Contact Person Area Code Daytime Telephone Number	
Name of Contact Person Area Code Daytime Telephone Number	
Mailing Address: Street Address:	
Registration Section Registration Section	
Division of Corporations 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: FLORIDA DEPARTMENT OF STATE	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Copy of Status & Certified Copy	

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

ULB mayarlable, enter alternate		State LLC company: must include "Lim LLC urpose of transacting business in				`onquany," "L	al.C.n or "LLC
		ability company is organized)			271231 (Fill number, if ap		
isdiction under the law of s	hich foreign limited ha	ibility company is organized)			(Fl:I number, if ap	plicable)	
	(Date first transa (See sections 60)	icted business in Florida, if prior 5.0984 & 603.0905, F.S. to dete	r to registration.) ermine penalty liability	v1			
5008 Star	fish Dr. :	SE Apt F	6. 5 0	208 1/2	spish de	Se '	Apt F
			((Mailing Address)	spish dr burg, fl		
St. Petersb	urg +L	33/05	-4	t letus	burg, +1	337	705
ne and <u>street addre</u>	ss of Florida reg	istered agent: (P.O. B	ox <u>NOT</u> accept	table)		(⁵)	
.	•	<u>-</u>				· · · · · · · · · · · · · · · · · · ·	700
Name:		4DOR Zd	···	_		:	007
Office Address:	4855	w HILL.	SBORO	BLUD	STE	B3	1
	2000	UT CREE	- -	-	334);	2	- :
	- / /^\/ ()			Florida _ º	7307 ₂) -	7.7 150
	COCONO	(City)			(Zip code)	•	
ered agent's accep	otance:	(City) and to accept service of				٠.	Ø1

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: Eugenia Galcia Olea **Ø**Manager □Manager Name: Address: 5008 Starfish Dr □Member □Member Address: SE unit F St. Peters burg □ Authorized □ Authorized FL 33705 Person Person □Other □ Other □Other_____ □Other__ Name: □Manager Manager Name: _____ **UMember** Address: ____ Address: []Member □ Authorized □ Authorized Person Person Other_____ ⊡Other____ □Other_ □Other____ □ Manager Name: □Manager Name: Address: ☐ Member Address: □Member □Authorized □ Authorized Person Person □Other □Other____ □Other LJOther_____ 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.

Eugenia Garcia Oka
Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "URB REAL ESTATE 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 SIXTEENTH DAY OF SEPTEMBER, A.D. 2024.

at corp.delaware.gov/aut

Authentication: 204396184

Date: 09-16-24

The Secretary of State of Delaware issued a certificate for URB REAL ESTATE LLC whose file number is 5882364 on 09/16/2024 under request number 20243691628 for authentication number 204396184

