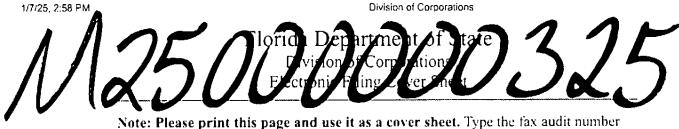
Division of Corporations



(((H250000078013)))

(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number

: (850)617-6383

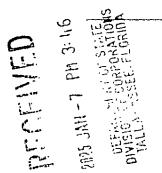
From:

: C T CORPORATION SYSTEM Account Name

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.

entitymanagementdallas@hudson-advisors.com Email Address:___



Foreign Limited Liability Company LSREF7 401 TRS, LLC

Certificate of Status	0
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Help

K. SALY

8 2025 JAN

From: Daylen Platt

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: LSREF7 401 TRS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L L.C.," or "LLC.") (If name unavailable, errer alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") 33-2573196 (Jurisdiction under the law of which foreign limited liability company is organized) 1/6/2025 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability.) 6688 N CENTRAL EXPY STE 1400 6688 North Central Expressway (Street Address of Principal Office) Suite 1600 DALLAS, TX 75206-3925 Dallas, TX, 75206 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation 33324 . Florida 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.

> C T Corporation System By:Lisa DuBois, Assistant Secretary (Registered agent's signature)

From: Daylen Plett

FILED 2025 JAN - 7 PM 4: 02

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

2025-01-07 14:00:11 CST

Title or Capacity:	Name and Address:	Title or Capacity	Name and Address:
□Manager	Name: LSREF7 401 REIT, Inc.	□Manager	Name: Laura P. Sims
Member	Address: 6688 North Central Expwy	□Member	Address: 6688 North Central Expwy
□ Authorized	Suite 1600	⊕Authorized	Suite 1400
Person	Dallas,, TX 75206	Person	Dallas, TX 75206
Other	Other	ŒOther_President	Other
□Manager	Name: Faith McManus	□Manager	Name: Mark Schuck
□Member	Address: 6688 North Central Expwy	∐Member	Address: 6688 North Central Expwy
■ Authorized	Suite 1600	□Authorized	Suite 1400
Person	Dallas, TX 75206	Person	Dallas, TX 75206
■Other Vice Presid	dent Other	©Other Vice Presid	dent Other
□Manager	Name:	□Manager	Name: Erm Marino
□Member	Address: 6688 North Central Expwy	∐Member	Address: 6688 North Central Expwy
□Authorized	Suite 1400	□Authorized	Suite 1400
Person	Dallas, TX 75206	Person	Dallas, TX 75206
Vice Presid	lent	Secretary	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

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LSREF7 401 TRS, 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 SIXTH DAY OF JANUARY, A.D. 2025.

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

10043627 8300 SR# 20250027904 Authentication: 202621765

Date: 01-06-25