## M23000001587

(Requestor's Name)					
(Address)					
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(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
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FALLAHASSEE, FLOR

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( Brumbia)

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195				
REFERENCE : 438890 8038825				
AUTHORIZATION: Sympletic man				
COST LIMIT : \$ 125.00				
ORDER DATE : February 7, 2023				
ORDER TIME : 12:50 PM				
ORDER NO. : 438890-015				
CUSTOMER NO: 8038825				
FOREIGN FILINGS				
NAME: SFR FUND VI BORROWER 2, LLC				
XXXX QUALIFICATION (TYPE: <u>LL</u> )				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XXX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Alexxis Weiland EXT#				

EXAMINER:

## **COVER LETTER**

**Registration Section** 

**Division of Corporations** 

TO:

SUBJECT:	SFR Fund VI Borrower 2, LLC				
		ne of Limited Liability Company			
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.			
Please return	all correspondence concerning this matter	to the following:			
	Robyn Moline				
	Name of Person				
	Progress Residential, LLC				
Firm/Company					
	PO BOX 4090				
	Address				
	Scottsdale, AZ 85256				
	City/State and Zip Code				
	legal@progressresidential.com				
	E-mail address: (to b	oe used for future annual report notification)			
For further in	formation concerning this matter, please c	all:			
Rol	oyn Moline	480 459-2446 at ( )			
	Name of Contact Person	at () Area Code Daytime Telephone Number			
Reg Div P.O	ling Address: gistration Section rision of Corporations D. Box 6327 lahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Plea	losed is a check for the following amount: se make check payable to: FLORIDA DE 125.00 Filing Fee	PARTMENT OF STATE  ee &  S155.00 Filing Fee &  S160.00 Filing Fee, Certificate			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABIL COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

SFR Fund VI Borrow	er 2, LLC Limited Liability Company; must include "Limited"	Liability Company "" L C " or "L C")		
(Hanc of Foreign	Emilied English Company, must mender Emilied	manny company. 15.15 c., or Elic. )		
f name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liabili	ty Company," "L.I. C," or "LI.C."	
Delaware		92-1392759 3.		
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605,0905, F.S. to determine	gistration ) penalty liability)		
Attn: Legal		Attn: Legal		
treet Address of Principal Office)		6. [Mailing Address]		
7500 N. Dobson Rd.	Suite 300	PO BOX 4090		
Scottsdale, AZ 85256	5	Scottsdale, AZ 85261		
. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	2023 FEB -	
Name:	Corporation Service Company		7 PM	
Office Address:	1201 Hays Street		2: 26	
	Tallahassee	32301 , Florida	_	
	(City)	(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.

Cleans Weibril, assisten + va president
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized manage [up to six (6) total]: Title or Capacity: Title or Capacity: Name and Address: Name and Address: Name: SFR Fund VI Equity Owner, LLC Brian Buffington □ Manager □ Manager Address: Attn: Legal Address: \_\_ **■**Member □Member 7500 N. Dobson Rd., Suite 300 7500 N. Dobson Rd., Suite 300 □ Authorized Authorized Scottsdale, AZ 85256 Scottsdale, AZ 85256 Person Person □Other □Other □Other □Other ☐ Manager Name: □Manager Name: □Member Address: \_\_\_\_\_ □Member Address: ☐ Authorized ☐ Authorized Person Person □Other\_\_\_\_ □Other \_\_\_\_\_ □Other □Other □Manager Name: \_\_\_\_\_ ■ Manager Name: \_\_\_\_\_ Address: ☐ Member Address: □ Member □ Authorized ☐ Authorized Person 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. 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 oatl 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.

Typed or printed name of signee

Brian Buffington



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

DELAWARE, DO HEREBY CERTIFY "SFR FUND VI BORROWER 2, 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. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SFR FUND VI BORROWER 2, LLC" WAS FORMED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2022.

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



Authentication: 202659401

Date: 02-07-23