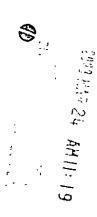
## M2300003888

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
eu Copies Certificates of Status
el Instructions to Filing Officer:

Office Use Only

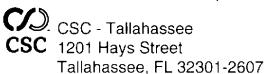


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KAR 27 2023 K. Brumbia)



850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 03/24/23 Order #: 608624-1

Re: Fairfield Affordable Housing Fund Tranche XI LLC

Processing Method: Routine

### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

120000000195

**AUTHORIZATION:** 

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

SUBJECT:	ld Affordable Housing Fund Trans	che XI LLC				
Name of Limited Liability Company						
		Company for Authorization to Transact Business in Florida." Certificate referenced foreign limited liability company to transact business in Florid				
Please return all corr	espondence concerning this matter to	o the following:				
El	izabeth St. Pierre					
		Name of Person				
G	eary, Porter & Donovan					
_	Firm/Company					
16	6475 Dallas Pkwy., Ste. 400					
_		Address				
Ad	ddison, TX 75001					
_	C	ity/State and Zip Code				
bstp	pierre@gpd.com					
	E-mail address: (to be	used for future annual report notification)				
For further informati	on concerning this matter, please cal	li:				
Elizabeth St. Pierre		972 349-2227				
-	Name of Contact Person	at ()				
Mailing Address:		Street Address:				
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
		Tallahassee, FL 32303				
England i-	a check for the following amount:					

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

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

(Name of Foreign	Limited Liability Company; must include "Limited	d Liabilit	y Company," "L.L.C.," or "LLC."	()	
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	orida The	alternate name must include "Limited	Liability Company," "L.L.C,"	or "l.LC.")
Delaware 2.		2			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3.	(FEI nur	nber, if applicable)	
4					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registratio ne penalty	n.) Tiability)		
5355 Mira Sorrento F 5. Street Address of Principal Office)		6.	5355 Mira Sorrento Plac		
Ste. 100			Ste. 100		
San Diego, CA 92121			San Diego, CA 92121	023 HA	_ 
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT:	acceptable)	324 PH	下記
Name:	Corporation Service Company	_		H 2: 59	;
Office Address:	1201 Hays Street			_	
	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. Weilard-Sirenson, AUP Corporation Service Company

(Registered agent's signature)

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:
<b>X</b> iManager	Name: FRH Vehicle Manager LLC	□Manager	Name:
□Member	Address: 5355 Mira Sorrento Place	□Member	Address:
□Authorized	Ste. 100	□Authorized	
Person	San Diego, CA 92121	Person	
□Other	Other	□Other	Other
⊡Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	<del></del>
□Other		□Other	Other
⊡Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□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 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.



Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FAIRFIELD AFFORDABLE HOUSING FUND

TRANCHE XI 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 TWENTY-THIRD DAY OF

MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FAIRFIELD AFFORDABLE HOUSING FUND TRANCHE XI LLC" WAS FORMED ON THE NINETEENTH DAY OF JANUARY, A.D. 2022.

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



Jeffrey W. Bullock, Secretary of State

Authentication: 202990783