

STATE OF GEORGIA
Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF AUTHORITY

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

LM Collier Ridge, LLC
a Foreign Limited Liability Company

has been duly formed under the laws of **Delaware** and has filed an application meeting the requirements of Georgia law to transact business as a **Foreign Limited Liability Company** in this state.

WHEREFORE, by the authority vested in me as Secretary of State, the above **Foreign Limited Liability Company** is hereby granted, on **01/13/2021**, a certificate of authority to transact business in the State of Georgia as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said application.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on **01/15/2021**.



Brad Raffensperger

Brad Raffensperger
Secretary of State



Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 856-2817
sos.georgia.gov/corporations

RECEIVED
SECRETARY OF STATE
INTAKE DIVISION
2021 JAN 13 AM 11:13

APPLICATION FOR CERTIFICATE OF AUTHORITY
FOR FOREIGN LIMITED LIABILITY COMPANY

IMPORTANT: Please provide the entity's primary email address when completing this form.

Primary Email Address: info@lionreg.com

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

1. LM Collier Ridge, LLC
Name of Limited Liability Company
Name Reservation Number (Optional)
Upon registration
Date business commenced (or proposed) in Georgia (NOTE: If date provided here is more than 30 days prior to the effective date of this application, a \$500 penalty plus fees must be paid. Penalty is statutory and cannot be waived by Secretary of State.)
2. Corporation Service Company
Name of Filing Person
251 Little Falls Drive
Wilmington DE 19808
Address City State Zip Code
complianceemail@cscglobal.com
Filer's Email Address 600-927-9801 Telephone Number
3. LM Collier Ridge, LLC
Name of Limited Liability Company in State or Country of Formation
Delaware
Jurisdiction (Home State or Country)
January 11, 2021
Date of Formation in Home State or Country
Perpetual
Period of Duration
4. 600 Wilshire Blvd, Suite 302
Address of Principal Place of Business
Los Angeles CA 90017
City State Zip Code
5. Corporation Service Company
Name of Registered Agent in Georgia sop@cscglobal.com
Registered Agent's Email Address
40 Technology Pkwy South, #300
Registered Office Street Address in Georgia (post office box or mail drop not acceptable for registered office address)
Norcross Gwinnett GA 30092
City County State Zip Code
6. LM Highpoint Townhomes, LLC
Manager's Name & Address (person with substantial responsibility for managing LLC's business activities)
600 Wilshire Blvd, Suite 302 Los Angeles CA 90017
City State Zip Code
7. 600 Wilshire Blvd, Suite 302
Address Where Limited Liability Company's Records Are Maintained
Los Angeles CA 90017
City State Zip Code
8. Effective Date: (Choose one) [X] Upon filing [] Delayed effective date and/or time:
(A delayed effective date must be within 90 days of the filing date.)
9. NOTICE: Mail the following items to the Secretary of State at the above address
(1) This application;
(2) Fee of \$235.00 (\$225 filing fee + \$10 paper filing service charge) payable to "Secretary of State." Filing fees are non-refundable.
This application is signed by a person duly authorized to sign such instruments by the laws of the jurisdiction under which the foreign limited liability company is organized. The foreign limited liability company undertakes to keep its records at the address shown in #7 above until its registration in Georgia is canceled or withdrawn. The foreign limited liability company, in accordance with Title 14 of the Official Code of Georgia Annotated, appoints the Secretary of State as agent for service of process if no agent has been appointed in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be found or served by the exercise of reasonable diligence.
Signature of Authorized Person: Ali Allie
Date: January 12, 2021
Authorized Person: Ali Allie
Title:
Print Name:

* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.