



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Application for Registration
FOREIGN Limited Liability Company
→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-49, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

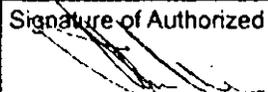
| | | |
|---|---------------------------|-----------------------|
| 1. The name of the limited liability company is: | | |
| EXCEL HOLDINGS 17 LLC | | |
| Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | | |
| The name, if different, under which it proposes to register and transact business in Rhode Island is: | | |
| | | |
| 2. The LLC is organized under the laws of: DELAWARE | | |
| 3. The date of its organization is: 10/26/2018 | | |
| And the period of its duration is: CHECK ONE BOX ONLY | | |
| <input checked="" type="checkbox"/> Perpetual (on-going) | | |
| <input type="checkbox"/> Date certain for dissolution _____ | | |
| 4. The name and address of the resident agent/office in Rhode Island is: | | |
| Agent Name SHOHAM AMIN | | |
| Street Address (NOT a P.O. Box) 945 DOUGLAS PIKE | | |
| City/Town SMITHFIELD | State RHODE ISLAND | Zip Code 02917 |
| 5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: COMMERCIAL REAL ESTATE INVESTMENT. | | |
| Check the box to indicate an attachment <input type="checkbox"/> | | |

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

NOV 09 2018

BY **ADEBP**
H.A. 10:40AM

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| 6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence. | |
| 7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is: 1621 NORTH KENT STREET, SUITE 1115, ARLINGTON, VIRGINIA 22209 | |
| 8. The mailing address for the limited liability company is: 1621 NORTH KENT STREET, SUITE 1115, ARLINGTON, VIRGINIA 22209 | |
| 9. Management of the Limited Liability Company: The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX <input type="checkbox"/> By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.) <input checked="" type="checkbox"/> By one (1) or more managers (List managers below) | |
| MANAGER | ADDRESS |
| SHOHAM AMIN | 1621 NORTH KENT STREET, SUITE 1115, ARLINGTON, VIRGINIA 22209 |
| | |
| | |
| | |
| 10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing. | |
| 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____ | |
| <i>Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.</i> | |
| Type or Print Name of LLC EXCEL HOLDINGS 17 LLC | Date 11/7/2018 |
| Signature of Authorized Person  _____ | |

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EXCEL HOLDINGS 17 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 NOVEMBER, A.D. 2018.

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Jeffrey W. Bullock, Secretary of State

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SR# 20187512305

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203850780

Date: 11-07-18



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

November 09, 2018 10:40 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

