STATEMENT OF AUTHORITY

This limited partnership submits the following statement of authority:

FIRST: The name of the limited partnership is: P3 LAF Hawthorn Hollows LP

SECOND: The Florida Document Number of the limited partnership is: B24000000127

THIRD: The mailing address of the limited partnership's principal office is:

1 UNION SQUARE WEST, FLOOR 3, SUITE 301
NEW YORK, NY 10003

FOURTH: This statement of authority grants authority to the following listed person(s) to enter into agreements or other documents on behalf of, or otherwise act for or bind, the company related to the transfer of utility infrastructure to the City of Venice.

Chris Mataja

Signature of authorized representative

Chris Mataja
Authorized Signatory

6/27/25
Date