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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 : (850)521-0821 : (850)558-1515 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	
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Foreign Limited Liability Company POOLS ON THE GULF, LLC

Certificate of Status	0
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COVER LETTER

	Registration Section Division of Corporations			
end ive	Pools On The Gulf, LLC			
SUBJEC	Name of Limited Liability Company			
The enck Existence	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Ce , and check are submitted to register the above referenced foreign limited liability company to transact business	rtificate of in Florida.		
Please re	turn all correspondence concerning this matter to the following.			
	Stephen I. Budow, Esq.			
	Name of Person			
	c/o Morrison Cohen LLP			
	Firm/Company			
	909 Third Avenue 27th Floor			
	Address			
	New York, NY 10022			
	City/State and Zip Code			
	sbudow@morrisoncohen.com			
	E-mail address: (to be used for future annual report notification)			
For furth	ner information concerning this matter, please call.			
	Stephen I, Budow 212 735-8668			
	Name of Contact Person Area Code Daytime Telephone Number			
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303			
	Enclosed is a check for the following amount. Please make check payable to: FLORIDA DEPARTMENT OF STATE S125.00 Filing Fee S130.00 Filing Fee S155.00 Filing Fee S160.00 Filing Fee, Ce Certificate of Status Certificate Copy of Status & Certificate Status	ertificate ied Copy		

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACTBUSINESS INTHE STATEOFFLORIDA:

	name adopted for the purpose of transacting business in Fl	orida insalternat	te raine must bit thee . Louise's Classic.	ny company. Lac. or had	,
Delaware 2.		3	(FEI number, s	Formulachia	
(Junisdiction under the law of w	hich (oreign limited liability company is organized)		(FEL NUMBEL,)	. wiptwable y	
-1 .					
 	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) re penalty liabilit	y)		
2301 Dawes Rd., M	obile, AL 36695		1 Dawes Rd., Mobile, Al		
5. (Street Address of Principal Office)		6	(Mailing Address)		
	_				
				不是	
					
7. Name and street addre	ss of Florida registered agent. (P.O. Box	<u>NOT</u> acc e p	table)		
7. Name and street addre	ss of Florida registered agent. (P.O. Box	<u>NOT</u> асс с р	table)	JAN - T	
	ss of Florida registered agent. (P.O. Box Corporation Service Company	<u>NOT</u> асс е р	table)	JAN -7 PA	でになって
7. Name and street addre Name.		NOT accep	table)	JAN - 7 PA V	ついった
Name.		NOT accep	table)	JAN - 7 PA 4: 44	でになって
	Corporation Service Company 1201 Hays Street	NOT accep	_	JAN - 7 PA 4: 44	でになっ
Name.	Corporation Service Company 1201 Hays Street Tallahassee	NOT accep		JAN - 7 PA 4: 44 CARASSEE TO DRIDE	でになって
Name.	Corporation Service Company 1201 Hays Street	NOT accep	— — 32301	JAN - 7 PA 4: 44 CARASSEE FLORIDA	でになって
Name. Office Address.	Corporation Service Company 1201 Hays Street Tallahassee (City)			1: 44 4: 44	
Name. Office Address. Registered agent's accellaving been named as referenced in this applies.	Corporation Service Company 1201 Hays Street Tallahassee (City) ptance: egistered agent and to accept service of	process for t	32301, Florida(Zup code) he above stated limited lia	ibility company at the p	agree
Name. Office Address. Registered agent's accellaving been named as redesignated in this applicate comply with the provis	Corporation Service Company 1201 Hays Street Tallahassee (City) ptance: egistered agent and to accept service of action, I hereby accept the appointment of sions of all statutes relative to the proper	process for t	32301, Florida(Zup code) he above stated limited lia	ibility company at the p	agree
Name. Office Address. Registered agent's accellaving been named as redesignated in this applicate comply with the provis	Corporation Service Company 1201 Hays Street Tallahassee (City)	process for t	32301, Florida (Zsp code) he above stated limited lia agent and agree to act in ate performance of my dut	ibility company at the p this capacity. I further ies, and I am familiar	agree

(Registered agent's signature)

FILEL 2021 JAN -7 FM 4: 44

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].

Fitle or Capacity:	Name and Address:	Title or Capacity	<u>:</u>	Name and Address:
□Manager	Name. Brendan Nyhan	□Manager	Name:	
□Member	Address:	□Member	Address.	
□ Authorized	2301 Dawes Rd, Mobile, AL 36695	□Authorized		
Person		Person		
■Other	□Other	□Other		Other
□Manager	Name	□Manager	Name	
□Member	Address	□Member	Address	
□Authorized		□Authorized		
Person		Person		
Other	□Other	□Óther		□ Other
□Manager	Name	□Manager	Name:	
□Member	Address:	⊡Memb e r	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.

N. S. S. Sara		
	Signature of an authorized person	
Brendan Nyhan		
	Typed or printed name of signee	

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "POOLS ON THE GULF, 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 JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POOLS ON THE GULF, LLC" WAS FORMED ON THE FOURTH DAY OF JANUARY, A.D. 2021.

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

2021 JAN - 7 PM 4: 45

a at coro delaware gov/au

Authentication: 202239386

Date: 01-07-21

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