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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC. Account Number : 120160000017

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Fax Number

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

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Foreign Limited Liability Company PARKS MANUFACTURING, LLC D/B/A PMI OPCO, LLC

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

IN COMPLIANCE WITH SECTION 603,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

PMI OpCo, LLC	pa Etimileo Clability Company, must sectude "Elimile	Market State Control of the Control	777 s. i. 11
2 Delawere	a name adopted for the purpose of transacting business in Flo walks theriga limited tables our pury is degree of	3	bblig-Complety,""Lt.C," or "LL.C.") bir, if explicable)
4.	(Date Arts Insuranced business in Florida, If prior to (See sections 605,0904 & 603,0905, F.S. to determine		
5. 1 Bush Street, Sui	te 650	6 1 Bush Street, Suite 650	
San Francisco, CA 94104		San Francisco, CA 94	-
7. Name and street addr	555 of Florida registered agent: (P.O. Box	NOT acceptable)	······································
Name:	Capitol Corporate Services, Inc.	<u> </u>	
Office Address:	155 Office Plaza Dr Ste A	*	
	Tellehassee	Florida 32301	
Having been named as a designated in this applic to comply with the provi	registered agent and to accept service of position, I hereby accept the appointment as islons of all statutes relative to the proper	(25 col process for the above stated limited a registeroil agent and agree to act	in this capacity. I further agree 🖳
designated in this applic to comply with the provi and accept the obligatio	eptance: registered agent and to accept service of position, I hereby accept the appointment at islans of all statutes relative to the proper us of any position as registered agent. (Registered agent position as a position as	(20 con process for the above stated limited straightered agent and agree to act and complete performance of my	in this capacity. I further agree duties, and I am familian with
Having been named as a designated in this applic to comply with the provi and accept the obligation. 8. The name, title or carries or Cauacity.	ptance: registered agent and to accept service of pation, I kereby accept the appointment at islans of all statutes relative to the proper use of mp position as registered agent. QUANTE (Reduced agent) (Reduced agent) psoity and address of the person(s) who has need Address;	(20 colorocess for the above stated limited is registered agent and agree to act and complete performance of my	in this capacity. I further agree duties, and I am familian with
Having been named as a designated in this applic to comply with the provious and accept the obligation. 8. The name, title or care.	eptance: registered agent and to accept service of position, I hereby accept the appointment at islans of all statutes relative to the proper us of any position as registered agent. (Registed agent posity and address of the person(s) who has	(20 con process for the above stated limited straightered agent and agree to act and complete performance of my	in this capacity. I further agree to duties, and I am familian with SSEE, FLS
Having been named as a designated in this applic to comply with the provi and accept the obligation. 8. The name, title or carries or Cauacity.	prince: registered agent and to accept service of partion, I hereby accept the appointment at islans of all statutes relative to the proper us of my position as registered agent. (Registed agent) pacity and address of the person(s) who has Name and Address: Horizon Holdings, LLC	(20 con process for the above stated limited straightered agent and agree to act and complete performance of my	in this capacity. I further agree duties, and I am familian with
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Having been named as a designated in this applic to comply with the provi and accept the obligation. 8. The name, title or can Title or Cauacity. Manager (Use attachments if necessary). Attached is a certifical	prince: registered agent and to accept service of partion, I hereby accept the appointment at islans of all statutes relative to the proper use of my position as registered agent. (Registered agent (Registered agent) Pacity and address of the person(s) who has name and Address: Horizon Holdings, LLC 1 mak Brow, man allo See Fenches, CA MIDA 1 sets are a more than 90 days old, we of which it is organized. (If the certificate	crocess for the above stated limited is registered agent and agree to act and complete performance of my software authority to manage is/are: Title or Canacity:	Name and Address: Name and Address: Serving custody of records in the

Typed or printed name of signer

<u>Delaware</u>

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARS, DO HEREBY CERTIFY "PARKS HARDFACTURING, LIC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAMARS AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JUNE, A.D. 2017.

AND I DO HEREST FURTHER CERTIFY THAT THE SAID "PARKS

MANUFACTURING, LIC" WAS FORMED ON THE FIFTH DAY OF MRY, A.D. 2017.

AND I DO REREBY FURTHER CERTIFY THAT THE ANNUAL YAXES HAVE BEEN ASSESSED TO DAYS.

6401821 6300 SRII 20174584363 You may verify this portificate deline at corpusionare grow Authentication: 202652020

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Date: 06-05-17