Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Cmsil.	Address:			
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FLORIDA/FOREIGN LP/LLLP Rockstar Capital Development Group, LP

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50

Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

Rockstar Capital Development Group, LP	1 NOS COL
Acceptable Limited Partnership suffixes: Limited Par	Liability Limited Partnership, which must include suffix) inership, Limited, L.P., LP, or Ltd. ixes: Limited Liability Limited Partnership, L.L.L.PROPURE
If name unavailable, name under which the limited po- business in F Arkansas, USA	artnership or limited liability limited partnership proposes to register to transact Florida: must contain acceptable suffix. August 17, 2018
State or Country of Formation	Date of Formation
4. Federal Employer Identification Number	31559
5. Name of Registered Agent for Service of Process	and Florida Street Address:
C.T. Corporation System	
1200 South Pine Island Road	
Plantation, Florida 33324	
of all statutes relative to the proper and complete p my position as registered agent. By: C	t and agree to act in this capacity—I further agree to comply with the provisions erformance of my duties, and I am familiar with and accept the obligations of T Corporation System
Sig	nature of Registered Agent Michael Jones, Assistant Secretary
7. Principal Office: 10333 Windy Trail	8. Mailing Address: 10333 Windy Trail
Bentonille, AR 72712	Bentonville, AR 72712
Bentonville , AR 72712 10333 Windy Trail Bentonville, AR 72712 Bentonville, AR 72712 Name of General Partner:	iress of each general partner:
	Mailing Address:

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days Note: If the date inserted in this block does not meet the document's effective date on the Department of State's (s after the date this document is filed by the Florida Department of State.) capplicable statutory filing requirements, this date will not be listed as the records.
12. Attached is a certificate of existence duly authentical Florida Department of State, by the Secretary of State of the law of which it is organized. Signed this day of OU O	ted, not more than 90 days prior to the delivery of this application to the rother official having custody of the entity's records in the jurisdiction under
The individual signing this document affirms that the fac	gnature of a general partner Rockstar Capital Development GP, LLC, its General Partner ets stated herein are true and the individual is aware that false information stitutes a third degree felony as provided for in s.817,155, F.S.
Filing Fees; Certified Copy (optional); Certificate of Status (optional);	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

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Arkansas Secretary of State John Thurston

State Capitol Building • Little Rock, Arkansas 72201-1094 • 501-682-3409

Certificate of Good Standing

1. John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

ROCKSTAR CAPITAL DEVELOPMENT GROUP, LP

authorized to transact business in the State of Arkansas as a Limited Partnership, filed Certificate of Limited Partnership in this office August 17, 2018.

Our records reflect that said entity, having complied with all statutory requirements in the States of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Scal. Done at my office in the City of Little Rock, this 24th day of September 2019.

John Thurston Offline Certificate Authorization Code: 86c3a795af6d3d3 To verify the Authorization Code, visit sos.arkansas.gov