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SERFIARY OF STATE

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Relentless Private Equity Fund, L.P. Name of Foreign Limited Part	nership or Limited Liability	v Limited Partnership
The enclosed application, certificate of status and for partnership to transact business in Florida.  Please return all correspondence concerning this ma		r a foreign limited partnership or limited liability limited
James Dodrill II. Esq.		
Contact Person		
Law Office of James G. Dodrill II, P.A.		
Firm/Company		
5800 Hamilton Way		
Address		
Boça Raton, FL 33496		
City, State and Zip Code		
jim@jimdodrill.com		
E-mail address: (to be used for future annual report	rt notification)	
For further information concerning this matter, please	se call:	
James Dodrill II, Esq.	_at (.561) 862-0	529
Name of Contact Person		ime Telephone Number
Enclosed is a check for the following amount:		
■\$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee) □\$1,008.75 Filing Fees and Certificate of Status	□\$1,052.50 Filing Fees and Certified Copy	☐\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address:	Street /	Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Acceptable Limited	Equity Fund, L.P. Limited Partnership or Limited Liah Partnership suffixes: Limited Partner. Liability Limited Partnership suffixes:	ship, Limited, L.P	., LP, or Ltd.			
If name unavailabl	e, name under which the limited partne business in Flori	ership or limited li da; must contain a		roposes to reg	ister to	transact
2. Delaware		3. Marc	h 31, 2021			
Si	tate or Country of Formation	Date of Formation		n		
4. Federal Employe	er Identification Number: <u>86-360415</u>	3				
5. Name of Register	red Agent for Service of Process and	Florida Street A	ddress:			
Irene Fonzi, Esq.	<del></del>					
1402 Highway A I A	A, Suite A					
Satellite Beach, FL	32937					
6. I hereby accept to of all statutes rel my position as reg	<u> </u>	rmance of my dull ML TVU	ies, and I am familiar with a	to comply wit nd accept the	th the p obligat	rovisions ions of
	Signate	ure of Registered	<b>B</b> gent			
7. Principal Office:	l	8. Mailing A	ddress:	:ಟಾ .::::	2021 HAY	
466 N. Harbor City	Blvd.	466 N. Harbo	or City Blvd.	<u> </u>		
Melbourne, FL 3293	35	Melbourne, I	FL 32935		<del>-</del>	en.
				<u> </u>		10
9. If limited partne	ership is a limited liability limited pa	rtnership, check	box. □	S L	5H H3	
	office address, and mailing addres	-		TATI	: 37	
Name of Genera	l Partner: Relentless General Partner, l	LLCName	of General Partner:			
Street Address:	466 N. Harbor City Blvd.	Street .	Address:			
	Melbourne, FL 32935	<del></del>				
Mailing Adding		<del></del>			•	<del></del>
Mailing Address	2 466 N. Harbor City Blvd.	Mailin	g Address:			
	Melbourne, FL 32935					
Name of Genera	l Partner:	Name	of General Partner:			<del></del>
Street Address:		Street .	Address:			
		<del></del>				

Mailine Address:

Mailing Address:

### Page I of 2

Name of Gen	neral Partner:	Name of General Partner:	
Street Addres	ss:	Street Address:	
Mailing Add	ress:	Mailing Address:	
(Effective date ca Note: If the date i	e, if other than the date of filing:  nnot be prior to nor more than 90 days inserted in this block does not meet the tive date on the Department of State's re	after the date this document is filed by the Florida Department of Sta applicable statutory filing requirements, this date will not be listed as	nte.)
Florida Departme	int of State, by the Secretary of State or	d, not more than 90 days prior to the delivery of this application to the official having custody of the entity's records in the jurisdiction	ie i under
Signed this	aday of Release	10/4 ( care of Partie C//	
THE MICHARDIAN SIE	ging and document attitue that the fact	1e45 General Partner, LLC.  Manager  Ma	ion
	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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Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RELENTLESS PRIVATE EQUITY FUND, L.P."

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 TWENTY-EIGHTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RELENTLESS

PRIVATE EQUITY FUND, L.P." WAS FORMED ON THE THIRTY-FIRST DAY OF

MARCH, A.D. 2021.

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

Authentication: 203080223

Date: 04-28-21

5755140 8300 SR# 20211493564