# 632000000763

(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
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### COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Snow Hill Management, L.P.				
Name of Foreign Limite	d Partnershi	p or Limit	nited Liability Limited Partnership	
The enclosed application, certificate of status partnership to transact business in Florida. Please return all correspondence concerning t			ted to register a foreign limited partnership or limited liability lim	ited
Debra Silverstein, Paralegal				
Contact Person		.=	<del></del>	
Orr & Reno, PA				
Firm/Company			<del></del>	
POB 3550				
Address			<del></del>	
Concord, NH 03302				
City, State and Zip Co	de	•	<del></del>	
dsilverstein@orr-reno.com				
E-mail address: (to be used for future annua	il report noti	itication)	)	
For further information concerning this matte	r, please cal	1:		
Debra Silverstein		603	223-9140	
Name of Contact Person	at (	Area Cod	ode and Daytime 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 and Certificate Status			0 Filing Fees	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: 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

Snow Hill Management, L.P.		
(Name of Limited Partnership or Limited Li Acceptable Limited Partnership suffixes: Limited Partner Acceptable Limited Liability Limited Partnership suffixe	ability Limited Partnership, which must include suff. ership, Limited, L.P., LP, or Ltd. es: Limited Liability Limited Partnership, L.L.L.P, or L.	
Snow Hill Capital, L.P.		
If name unavailable, name under which the limited part business in Flo	thership or limited liability limited partnership proposes orida; must contain acceptable suffix.	to register to transact
, Delaware	3. February 2, 2018	
State or Country of Formation	Date of Formation	<del></del>
4. Federal Employer Identification Number:		
5. Name of Registered Agent for Service of Process at	nd Florida Street Address:	
Ziyao Wang		
2708 NE Waldo Road		
Gainesville, FL 32609		
6. Thereby accept the appointment as registered agent of all statutes relative to the proper and complete per my position as registered agent.	and agree to act in this capacity. I further agree to com rformance of my duties, and I am familiar with and acce	ply with the provisions pt the obligations of
Sign	ature of Registered Agent	
7. Principal Office:	8. Mailing Address:	2022 SLI
2708 NE Waldo Road	2708 NE Waldo Road	i i i
Gainesville, FL 32609	Gainesville, FL 32609	0° U
		A III
9. If limited partnership is a limited liability limited	partnership, check box.	
10. Name, principal office address, and mailing addi-	ress of each general partner:	<del>-</del>
Name of General Partner: EZW Management, 1	ALC Name of General Partner:	
2700 MC W M D 1		
Street Address: Gainesville, FL 32609	Street Address:	
	Mailing Address.	
Gainesville, FL 32609		
	Name of General Partner:	
	Street Address:	
Mailing Address:	Mailing Address:	

## Page 1 of 2

Name of General Partner:		Name of General	Partner:
Street Address:		Street Address: _	
		<del></del>	
11. Effective date, if other than the configuration of the first the date inserted in this block document's effective date on the Department.	does not meet the applic	cable statutory filing requ	filed by the Florida Department of State) irements, this date will not be listed as the
12. Attached is a certificate of existence Florida Department of State, by the Se the law of which it is organized.	ce duly authenticated, no ceretary of State or other	ot more than 90 days prior official having custody o	to the delivery of this application to the f the entity's records in the jurisdiction under
Signed this 7 Z d	lay of April	,20 22	_
		ient, LLC	Ziyao Wang, Member
	Signatu	re of a general partner	
The individual signing this document submitted in a document to the Depart	affirms that the facts statement of State constitute	ted herein are true and the s a third degree felony as	individual is aware that false information provided for in \$.817.155, F.S.

Page 2 of 2

\$52.50

\$8.75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Filing Fees: Certified Copy (optional):

Certificate of Status (optional):

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SNOW HILL MANAGEMENT, 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 FOURTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SNOW HILL MANAGEMENT, L.P." WAS FORMED ON THE FIRST DAY OF FEBRUARY, A.D. 2018.

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

Authentication: 203341633

Date: 05-04-22

6738057 8300 SR# 20221771513