

B22000000279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

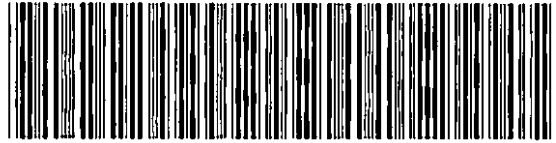
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600388717566

FILED

2022 MAY 31 AM 9:16

TALLAHASSEE, FLORIDA

RECEIVED

2022 MAY 31 PM 12:03

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

S. ROBERTS

MAY 31 2022

FILE 2ND

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 714283 4320097
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 1000.00

ORDER DATE : May 31, 2022
ORDER TIME : 10:36 AM
ORDER NO. : 714283-010
CUSTOMER NO: 4320097

FOREIGN FILINGS

NAME: ANIMO VENTURES II, LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: _____

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

1. Animo Ventures II, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Cayman Islands

State or Country of Formation

3. April 21, 2022

Date of Formation

4. Federal Employer Identification Number. _____

5. Name of Registered Agent for Service of Process and Florida Street Address:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Elizabeth Harris

Elizabeth Harris, assistant VP

Signature of Registered Agent

7. Principal Office:

5935 NE 6th Court, Miami, FL 33137

8. Mailing Address:

5935 NE 6th Court, Miami, FL 33137

9. If limited partnership is a limited liability limited partnership, check box. ☐

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: Animo Ventures II, G.P.

Name of General Partner: _____

Street Address: 5935 NE 6th Court, Miami, FL 33137

Street Address: _____

Mailing Address: 5935 NE 6th Court, Miami, FL 33137

Mailing Address: _____

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

FILED
2022 MAY 31 AM 9:16
TALLAHASSEE, FL


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 after the date this document is filed by the Florida Department of State.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 27 day of May, 2022



Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

IC-117965

Certificate of Good Standing of a Partnership

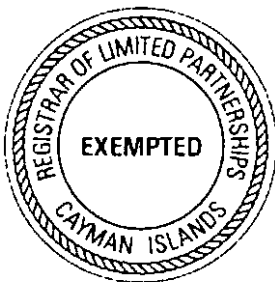
TO WHOM IT MAY CONCERN

I DO HEREBY CERTIFY that

Animo Ventures II, L.P.

a partnership duly organized and existing under and by virtue of the Acts of The Cayman Islands is at the date of this certificate in Good Standing with this office, and duly authorized to exercise therein all the powers vested in the partnership.

*Given under my hand and Seal at George Town in the
Island of Grand Cayman this 11th day of May
Two Thousand Twenty-Two*



A handwritten signature in black ink, appearing to be "S. Smith", written over a horizontal line.

**An Authorised Officer
Registrar of Partnerships
Cayman Islands.**

Authorisation Code : 390300753618
www.venty.gov.ky
11 May 2022