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(Address)

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(City/State/Zip/Phone #)

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2022 JUN -1 PM 1:18

S. FRANKLIN
JUN 18 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mitchell Silberberg & Knupp LLP
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.
Please return all correspondence concerning this matter to:

Doug Gold/c/o Susan Williams Howard
Contact Person

Mitchell Silberberg & Knupp LLP
Firm/Company

2049 Century Park East, 18th Floor
Address

Los Angeles, CA 90067
City, State and Zip Code

djg@msk.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Doug Gold at (310) 312-3712
Name of Contact Person — Area Code 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 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:
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

2002 JUN -1 PM 1:18

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

1. Mitchell Silberberg & Knupp LLP

(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. California
State or Country of Formation

3. December 26, 1995
Date of Formation

4. **Federal Employer Identification Number.** 95-1883538

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

Gabriel Veneroso Miranda

1500 NE Miami Place Apt. 3302

Miami, FL 33132

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.*

Gabriel Miranda
Signature of Registered Agent

7. **Principal Office:**	8. **Mailing Address:**
2049 Century Park East, 18th Fl.	2049 Century Park East, 18th Fl.
Los Angeles, CA 90067	Los Angeles, CA 90067

2022 APR -1 PM 1:18

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: Gregory Hessinger	Name of General Partner:
Street Address: 437 Madison Avenue - 25th Floor New York, NY 10022	Street Address:
Mailing Address: 437 Madison Avenue - 25th Floor New York, NY 10022	Mailing Address:
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	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 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 17th day of May ,20 22

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**

2022 MAY -

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State of California
Secretary of State

CERTIFICATE OF GOOD STANDING
CALIFORNIA LIMITED LIABILITY PARTNERSHIP

I, SHIRLEY N. WEBER, PH.D., Secretary of State of the State of California, hereby certify:

That on the **26th day of December, 1995, MITCHELL, SILBERBERG & KNUPP LLP,** became recognized under the laws of the State of California by filing a certificate of registration in this office; and

That according to the records of this office, the said limited liability partnership is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability partnership.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 23, 2022.

Shirley N. Weber, Ph.D.
Secretary of State

NP-25 (REV 01/2021)

GGB

COPY

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TO TRANSACT BUSINESS IN FLORIDA

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New York, NY 10022
Mailing Address: 437 Madison Avenue - 25th Floor
New York, NY 10022

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