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(Req	uestor's Name)	
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(City	/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of	of Status
Special Instructions to Filing	g Officer:	

Office Use Only



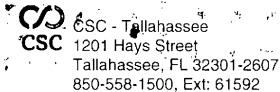
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□ CUSHING



To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 12/27/23 Order #: 1327758-1

Re: Integrum Holdings LP Processing Method: Routine

#### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$1000.00 - FL State Account Number:

12000000195

AUTH:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

#### COVER LETTER

	COVERLE	IIEK			
TO: Registration Section Division of Corporations					
SUBJECT: Integrum Holdings LP					
Name of Foreign Limited Partner	ership or Limited	Liability Limited Partnership	-		
The enclosed application, certificate of status and fee partnership to transact business in Florida.  Please return all correspondence concerning this mat		o register a foreign limited partnershi	p or limited	I liabilit	y limited
Justin Schneese					
Contact Person		<del></del>			
Corporation Service Company					
Firm/Company		_			
251 Little Falls Drive					
Address	-	_			
Wilmington, DE 19808					
City, State and Zip Code		<del>-</del>			
justin.schneese@cscglobal.com					
E-mail address: (to be used for future annual report	t notification)	_	وداد	~>	
For further information concerning this matter, pleas	e call:		,	023	
Justin Schneese	302	636-5400 ext. 61390	ř .··	<b>2</b> 023 DEC	- 4
Name of Contact Person		and Daytime Telephone Number		27	
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 Fill and Certified		- : - : : : : : : : : : : : : : : : : :	<b>0</b> :±0	Andrew P

#### 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

Integrum Holding	s LP		
Acceptable Limited P	artnership suffixes: Limited Partne	bility Limited Partnership, which must increship, Limited, L.P., LP, or Ltd.  Limited Liability Limited Partnership, L.L.	
If name unavailable.		nership or limited liability limited partnershipida: must contain acceptable suffix.	p proposes to register to transact
, Delaware		, February 9, 2021	
Sta	te or Country of Formation	3. February 9, 2021  Date of Forma	tion
4. Federal Employer	Identification Number: 86 - 22 5	5 384	
	ed Agent for Service of Process an		
1201 Hays Street			
Tallahassee, FL 32	301		
6. I hereby accept the of all statutes rela my position as regi	tive to the proper and complete perf	nd agree to act in this capacity. I further ag ormance of my duties, and I am familiar with Weilard - prenson, AVP	h and accept the obligations of
	Signa	ture of Registered Agent	2023 DEC
7. Principal Office:		8. Mailing Address:	200
55 Hudson Yards		55 Hudson Yards	7
New York, NY 10001		New York, NY 10001	A S
			<u> </u>
9. If limited partner	rship is a limited liability limited p	partnership, check box. 🗆	
• •	office address, and mailing addre	ess of each general partner:	
Name of General	Partner:Integrum Holdings LLC	Name of General Partner:	
Street Address:	55 Hudson Yards,	Street Address:	
	New York, NY 10001		
Mailing Address:		Mailing Address:	
·	as above.		
Name of General	Partner:	Name of General Partner:	
Street Address:		Street Address:	
Mailing Address:		Mailing Address:	

#### Page 1 of 2

Name of General Partner:_		Name of General Pa	artner:
Street Address:		Street Address:	
Mailing Address:		 Mailing Address:	
		_	
(Effective date cannot be prior Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable Department of State's records.	date this document is fit e statutory filing require	led by the Florida Department of State.) ements, this date will not be listed as the
	the Secretary of State or other off		o the delivery of this application to the the entity's records in the jurisdiction under
Signed this	day of	20 23	-
	Signature o	f 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): Certificate of Status (optional): \$52.50

\$8.75

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "INTEGRUM HOLDINGS LP" 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 FIFTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INTEGRUM"
HOLDINGS LP" WAS FORMED ON THE NINTH DAY OF FEBRUARY, A.D. 2021.

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



Jeffrey W. Bullock, Secretary of State

Authentication: 204732495