4/12/24, 9:19 AM

Division of Corporations

Florida Department of State

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(((H240001339193)))



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Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300

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Enter the email address for this business entity to be used for future compliance@springboard.org

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FLORIDA/FOREIGN LP/LLLP Springboard CDFI 2023-1 LP

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To:

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

Springboard CDFI 2023-1 LP			
(Name of Limited Partnership or Limited Li Acceptable Limited Partnership suffixes: Limited Partn Acceptable Limited Liability Limited Partnership suffixe			
If name unavailable, name under which the limited par business in Flo		pposes to register to transact	
2 California	38/1/2023		
State or Country of Formation	Date of Formation		
4. Federal Employer Identification Number: $\lfloor 93 \cdot 27 \rfloor$	31245		
5. Name of Registered Agent for Service of Process a	nd Florida Street Address:		
Business Filings Incorporated			
1200 South Pine Island Road			
Plantation, Florida 33324			
of all statutes relative to the proper and complete per my position as registered agent About	1		
Sign	nature of Registered Agent Chris Das, AV	P. Business Filings Incorpora	ited
Nign 7. Principal Office:	ature of Registered Agent Chris Das, AVI 8. Mailing Address:	P, Business Filings Incorpora	_
		8	nted ©
7. Principal Office:	8. Mailing Address:	8	_
7. Principal Office: 2140 Hoover Avenue, Suite 115	8. Mailing Address: 2140 Hoover Avenue, Suite 115	P. Business Filings Incorpora	_
7. Principal Office: 2140 Hoover Avenue, Suite 115	8. Mailing Address: 2140 Hoover Avenue, Suite 115 National City, California 91950	2074 APR 12	_
7. Principal Office: 2140 Hoover Avenue, Suite 115 National City, California 91950 9. If limited partnership is a limited liability limited	8. Mailing Address: 2140 Hoover Avenue, Suite 115 National City, California 91950 partnership, check box.	2074 APR 12	_
7. Principal Office: 2140 Hoover Avenue, Suite 115 National City, California 91950 9. If limited partnership is a limited liability limited 10. Name, principal office address, and mailing additional city in the california of	8. Mailing Address: 2140 Hoover Avenue, Suite 115 National City, California 91950 partnership, check box. ress of each general partner:	2074 APR 12	_
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Fax Audit # H24000133919 3

	Page 1	
Name of General Partner.		Name of General Parmer:
Street Address:	S	Street Address:
Mailing Address:	λ	Mailing Address:
 Attached is a certificate of existence dul Florida Department of State, by the Secretar the law of which it is organized. 	than 90 days after the data y authenticated, not more to y of State or other official	than 90 days prior to the delivery of this application to the having custody of the entity's records in the jurisdiction under
Sigued this 9½ day of	•	Angel Capalba, President of Springboard CDFI, Member of Springboard CDFI LLC, General Partner

The individual signing this document affirm 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 5.817.455, 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 2 of 2

To: Page: 3 of 5 2024-04-12 08:29:10 CST 16082993912 From: Alexis Gregor



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

Entity Name: Springboard CDFI 2023-1 LP

Entity No.: 202358404295 Registration Date: 08/01/2023

Entity Type: Limited Partnership - CA

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 12, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 199613332

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.