

B25000000021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

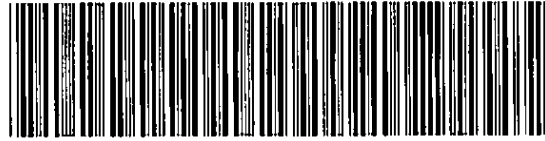
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600442601276

APPROVED
AND
FILED

2025 JAN 14 AM 10:20

RECEIVED
FEB 11 2025

RECEIVED

2025 JAN 14 AM 10:20

RECEIVED

JAN 15 2025

K. Brumble

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com

incserv

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau

850.656.7953

REQUEST DATE 1/14/2025

PRIORITY Regular Approval

OUR REF # (Order ID#) 1337099

ORDER ENTITY

PRF MULTI-SERIES FUND, LP

PLEASE PERFORM THE FOLLOWING SERVICES:

PRF MULTI-SERIES FUND, LP (FL)

File the attached foreign qualification document

NOTES:

\$1,000.00 Authorized

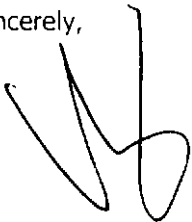
RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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

1. PRF Multi-Series Fund, LP

(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. Delaware

State or Country of Formation

3. January 2, 2025

Date of Formation

4. **Federal Employer Identification Number** _____

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

Casey Gard

1680 Michigan Avenue, Suite 817

Miami Beach, FL 33139

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.*

Casey Gard
(Signature)

Signature of Registered Agent

7. **Principal Office:**

1680 Michigan Avenue, Suite 817

Miami Beach, FL 33139

8. **Mailing Address:**

1680 Michigan Avenue, Suite 817

Miami Beach, FL 33139

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: PRF Multi-Series GP, LLC

Name of General Partner: _____

Street Address: 1680 Michigan Avenue, Suite 817

Street Address: _____

Miami Beach, FL 33139

Mailing Address: _____

Mailing Address: _____

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

**APPROVED
AND
FILED**
2025 JAN 14 AM 10:20
CLERK OF DISTRICT COURT
14th DISTRICT OF FLORIDA

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: _____

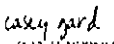
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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 2nd day of January, 20 25

PRF Multi-Series GP, LLC, its
General Partner
By: Casey Gard

Signed by:


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

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRF MULTI-SERIES FUND, 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 FOURTEENTH DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "PRF MULTI-SERIES FUND, LP" IS A SERIES LIMITED PARTNERSHIP.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRF MULTI-SERIES FUND, LP" WAS FORMED ON THE SECOND DAY OF JANUARY, A.D. 2025.

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



10053387 8300E

SR# 20250122685

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202689023

Date: 01-14-25