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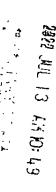
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Special Instructions to Filing Officer:					
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COVER LETTER

	tration Section ion of Corporations				
	MEP Management, Inc.				
SUBJECT:	Name	of corporation -	must include suffix		
Dear Sir or M	adam:				
"Certificate of	"Application by Forcign C f Existence," or "Certificat cod foreign corporation to	e of Good Standi	ng" and check are submitt	usiness in Florida," and to register the	
Please return	all correspondence concern	ning this matter to	o the following:		
Erik Vosatka					
		Name of Po	erson		
Mangrove Equ	uity Partners, LP				
		Firm/Comp	any	* ,*	
101 S. Frankli	in Street, Suite 205			- p	٥
		Addres	S		_
Tampa, FL 33	6602				_
		City/State an	d Zip code	(firstion)	
evosatka@ma	ingroveequity.com				7
	E-mail addre	ss: (to be used fo	r future annual report not	fication)	<u> </u>
For further in	nformation concerning this	matter, please ca	ill:		
Erik Vosatka		at (813	853-3450		
Nan	ne of Person	Area Code	Daytime Telephor	ne Number	
Reg Divi The 241:	REET/COURIER ADDRI istration Section ision of Corporations Centre of Tallahassee 5 N. Monroc Street, Suite 8 ahassee, FL 32303		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassec, FL	tion porations	
Enclosed is Please make of \$70.00 F		DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

06	1.1. in 171 in in		-,- -	
	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Flo	ruda)	
2. DE	3.	26-0637898		
	y under the law of which it is incorporated)	(FEI number, if applicable)		
4. 7/31/2007	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)		
7 101 S. Franklin S	treet, Suite 205, Tampa, FL 33602			
<i>'</i>		ce street address)		
				,
	(Current mailing	g address, if different)	:	45
				(
			• •	<u> </u>
8. Name and street	at address of Florida registered agent: (P.O	Box NOT acceptable)		51
8. Name and stree Name:	address of Florida registered agent: (P.O	Box NOT acceptable)		UL 13 A
	·	Box <u>NOT</u> acceptable)		St 13 AHD
Name:	Edwin M. Young	11602		UL 13 AH 10: 49
Name:	Edwin M. Young 101 S. Franklin Street, Suite 205			UL 13 MI 10:49

under the law of which it is incorporated.

A DIRECTOR:	s							
□Chairman	Name: Edwin M. Young	□ Chairman	Name: J. Hunter Reichert					
□Vice Chairman	IALS Fronklin Street	□Vice Chairman	Address: 101 S. Franklin Street					
☐Director	Suite 205	Director	Suite 205					
□President	Tampa, FL 33602	El President	Tampa, FL 33602					
■ Vice President	· · · · · · · · · · · · · · · · · · ·	□Vice President						
Secretary	□ Treasurer	☐ Secretary	☐ Treasurer					
□Other		□Other						
□Chairman	Name: Glenn B. Oken	□ Chairman	Name: Mark A. Danzi					
□Vice Chairman	Address: 101 S. Franklin Street	□Vice Chairman	Address: 101 S. Franklin Street					
☐ Director	Suite 205	□ Director	Suite 205					
☐President	Tampa, FL 33602	□President	Tampa, FL 33602					
■ Vice President	\$10-70-	■ Vice President						
☐ Secretary	☐Treasurer	☐ Sccretary						
□Other		□Other	Other - 1					
□ Chairman	Name: Erik Vosatka	□ Chairman	Name:					
☐ Vice Chairman	Address:	∐Vice Chairman	Address:					
□Director	Suite 205	∐Director						
□President	Tampa, FL 33602	□President						
Vice President		□Vice President						
☐ Secretary	Treasurer	☐ Secretary	□ Tr e asurer					
□Other	L]Other	Other	Other					
Important Notice: I individuals may be	Use an attachment to report more than six (6). The attachment added to the Index when filing your Florida Departme	chment will be image int of State Annual Re	I for reporting purposes only. Non-indexed port form.					
Signature of Director or Officer								
The officer or direct she is aware that far s.817.155, F.S.	tor signing this document (and who is listed in number ilse information submitted in a document to the Departs	r 11 above) affirms the ment of State constitut	nt the facts stated herein are true and that he or les a third degree felony as provided for in					

Edwin M. Young
(Typed or printed name and capacity of person signing application)



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

DELAWARE, DO HEREBY CERTIFY THAT "MEP MANAGEMENT, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN

CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE THIRTY-FIRST DAY OF JULY, A.D. 2007, AT 2:02 O'CLOCK P.M.

CERTIFICATE OF CORRECTION, FILED THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2007, AT 11:30 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID CORPORATION, "MEP MANAGEMENT, INC.".

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

Authentication: 203643278

Date: 06-29-22