

F23000004126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

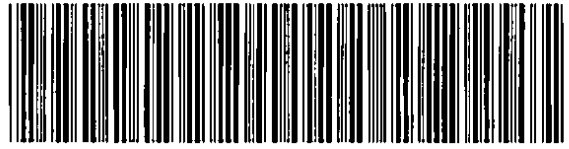
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APPROVED
AND
FILED

2023 JUL -5 PM 2:49

SECRETARY OF STATE
MAIL ASSISTANT, FILING



2023 JUL -5 AM 11:25

JUL 17 2023
Brumby



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2023

CORRECTED
Please Allow For
Same File Date

CT CORP
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 US

SUBJECT: PPL INTERMEDIATE HOLDINGS INC.
Ref. Number: W23000091968

We have received your document for PPL INTERMEDIATE HOLDINGS INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$150.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Corey Pettway
Regulatory Specialist II

Letter Number: 423A00014971

2023 JUL 17 AM 10:21

CT CORP
(850)656-4724
3458 Lakeshore Drive,
Tallahassee, FL 32312

Date: 07/05/2023
Acc#120160000072

eric Dill

Name:	PPL INTERMEDIATE HOLDINGS INC.
Document #:	
Order #:	14991221

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notification

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 228.75

Thank you!

**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.*

1. PPL INTERMEDIATE HOLDINGS INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 88-2954866
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/21/2022 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 07/01/2022
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1413 CENTER DRIVE, STE 220, PARK CITY, UT, 84098
(Principal office street address)

148 STATE STREET, BOSTON, MA, 02109-2506
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation FL 33324
(City) (Zip code)

APPROVED
AND
FILED
2023 JUL -5 PM 2:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

C T Corporation System
By: Candice Pignataro Candice Pignataro, Assistant Secretary
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: Doug Schillinger
☐ Vice Chairman Address: 1413 CENTER DRIVE
STE 220
☐ Director PARK CITY, UT, 84098
☒ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Eric Moore
☐ Vice Chairman Address: 1413 CENTER DRIVE, STE 220
PARK CITY, UT, 84098
☐ Director
☐ President
☒ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Andrea Tecce
☐ Vice Chairman Address: 1413 CENTER DRIVE, STE 220
PARK CITY, UT, 84098
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☒ Other CSCO ☐ Other

☐ Chairman Name: David Goldberg
☐ Vice Chairman Address: 1413 CENTER DRIVE, STE 220
PARK CITY, UT, 84098
☐ Director
☐ President
☐ Vice President
☒ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Vincent Coppola
☐ Vice Chairman Address: 1413 CENTER DRIVE, STE 220
PARK CITY, UT, 84098
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☒ Other CEO ☐ Other

☐ Chairman Name: Sherwin Krug
☐ Vice Chairman Address: 1413 CENTER DRIVE, STE 220
PARK CITY, UT, 84098
☐ Director
☐ President
☐ Vice President
☐ Secretary ☒ Treasurer
☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. David Goldberg
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she 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.

13. David Goldberg, Secretary
(Typed or printed name and capacity of person signing application)

Delaware

The First State


Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PPL INTERMEDIATE HOLDINGS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF JUNE, A.D. 2023.

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.




Jeffrey W. Bullock, Secretary of State

6870196 8300

SR# 20232783644

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

Authentication: 203568338

Date: 06-16-23