

F24000006428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

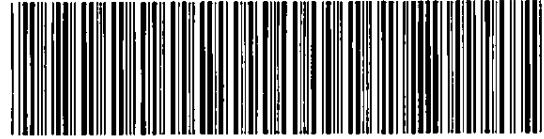
Certified Copies _____

Certificates of Status _____

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W24-1163202

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2024 DEC 11 AM 11:19

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FALL 2024
FALL 2024
FALL 2024

DEC 18 2024

K. Brumbley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 12, 2024

COGENCY GLOBAL

SUBJECT: LANDSCAPE MANAGEMENT ACQUISITION CORPORATION
Ref. Number: W24000163202

RECEIVED
2024 DEC 17 AM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for LANDSCAPE MANAGEMENT ACQUISITION CORPORATION and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 224A00026959

Please keep
original
file date
😊



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 1200000000088
If there are any issues
please contact Patrice at
850-202-9071

Date: 12/17/2024

Name: Cheyenne Davis

Reference #: 2590515

Entity Name: LANDSCAPE MANAGEMENT ACQUISITION CORPORATION

- ☒ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

Authorized Amount: \$125.00

Signature: *Chyma Paine*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Landscape Management Acquisition Corporation
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michelsa Calderon

Name of Person

c/o Trivest Partners

Firm/Company

2811 Ponce de Leon Blvd, Ste. 400

Address

Coral Gables, FL 33134

City/State and Zip code

mcalderon@trivest.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelsa Calderon

at (305) 858-2200

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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.*

1. Landscape Management Acquisition Corporation
(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. 87-1282196
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/17/2021 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 5072 W Plano Pkwy Ste. 280, Plano, TX 75093
(Principal office street address)

(Current mailing address, if different)

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

Name: Cogeneity Global Inc.

Office Address: 115 N Calhoun Street, Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2024 DEC 11 AM 11:19

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AND
FILED

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.

/s/ Constance Lawson 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: Stephen Reynolds
☐ Vice Chairman Address: 2811 Ponce de Leon Blvd #400
☒ Director Coral Gables, FL 33134
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Stephanie Suggs
☐ Vice Chairman Address: 5072 W Plano Pkwy #280
☐ Director Plano, TX 75093
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other CFO ☐ Other _____

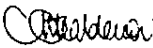
☐ Chairman Name: David Gershman
☐ Vice Chairman Address: 2811 Ponce de Leon Blvd #400
☒ Director Coral Gables, FL 33134
☐ President _____
☒ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Stephen Koren
☐ Vice Chairman Address: 2811 Ponce de Leon Blvd #400
☐ Director Coral Gables, FL 33134
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Michelsa Calderon
☐ Vice Chairman Address: 2811 Ponce de Leon Blvd #400
☐ Director Coral Gables, FL 33134
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Asst. Secretary ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ 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. 
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. Michelsa Calderon, Assistant 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 "LANDSCAPE MANAGEMENT ACQUISITION CORPORATION" 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 TENTH DAY OF DECEMBER, A.D. 2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LANDSCAPE MANAGEMENT ACQUISITION CORPORATION" WAS INCORPORATED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2021.

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



6010841 8300

SR# 20244446820

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.

Authentication: 205088278

Date: 12-10-24