

L22600367502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

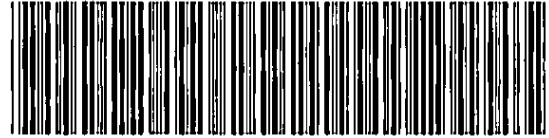
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200393040582

S. CHATHAM
AUG 23 2022

RECEIVED
AUG 24 PM 3:00
ALABAMA SECRETARY OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 AUG -4 AM 1:44



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2022

INCSERV

*Please honor the
original submission date
as the file date. Thanks! :)*

SUBJECT: KENSINGTON FUNDING EGON, LLC
Ref. Number: W22000101668

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

Florida law requires the principal office address to be a street address.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham
Regulatory Specialist II
New Filing Section

Letter Number: 022A00017546

*Please honor the
original submission date
as the file date. Thanks! :)*

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2022 AUG 22 PM 3:08
AUG 22 2022

Incorporating Services, Ltd.

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



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 8/4/2022

PRIORITY Regular Approval

OUR REF # (Order ID#) 1060039

ORDER ENTITY

KENSINGTON FUNDING EGON, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

KENSINGTON FUNDING EGON, LLC (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$155.00 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,

A handwritten signature in black ink, appearing to be "WJ" or similar.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 AUG -4 AM 1:44

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.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KENSINGTON FUNDING EGON, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is

Principal Office Address:

Mailing Address:

142 Andalusia Way
Palm Beach Gardens, FL 33418

PO Box 33162
Palm Beach Gardens
Florida 33420

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Paul K. DeGrado

Name

142 Andalusia Way
Florida street address (P.O. Box ~~NOT~~ acceptable)

Palm Beach Gardens	Florida	33420
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV:

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

Evgeniy Vagner, AMBR

1 Gregg Street, Apartment 703
Jersey City, New Jersey 07302

Kensington Capital
Advisors, LLC, AMBR

PO Box 4192
River Edge, New Jersey 07661

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing


(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any 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.

Marc O. Grimaldi, Authorized Representative
Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 AUG -4 AM 1:42