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(Business Entity Name)				
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 739555 8145548

AUTHORIZATION : South M

COST LIMIT : \$125.00

ORDER DATE : July 25, 2017

ORDER TIME : 3:03 PM

ORDER NO. : 739555-001

CUSTOMER NO: 8145548

FOREIGN FILINGS

NAME: LADD PARTNERS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 (DO2, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. LADD PARTNERS, L (Name of Foreign	A.C Finited Trability Company; must include "Trinited	Haability Company," "L.L.C.," or "ILC	<u></u>
(hi nama unatrillable, cuter alternate a	ame adopted for the purpose of transacting business in Hor	ids. The alternate game must include "I imited	Highlits Company "THE C" or "HEC"
California	the module of the pulpose of nationality countries in the	A7 000501	• • •
(furisdiction under the law of wh	nich foreign limited hability company is organized)	3	number, if applicable)
•			
4.	(Date first transacted business in Florida, if prior to r (See sections (4)5 0304 & 605 0305, F.S. to determine	egistration) ne penalty liabilitys	
5. 2182 Casa Mia Dr	·	6. 2182 Casa Mia Dr	
(Street Address of P	micipal Office)	(Mailing	Address)
San Jose,CA,95124		San Jose,CA,95124	· · · · · · · · · · · · · · · · · · ·
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		<u> </u>
	Tallahassee (Cay) tance: gistered agent and to accept service of p	, Florida 32301	
to comply with the provisi	tion, I hereby accept the appointment as tons of all statutes relative to the proper s of my position as registered agent. Corporation Service Company By: (Registered agent's s	and complete performance of n	
8. The name, title or capa Title or Capacity:	ncity and address of the person(s) who ha	s/have authority to manage is/are Title or Capacity:	e: Name and Address:
AMBR	Krista Ladd	AMBR	James Ladd
	2182 Casa Mia Dr	AMUN	2182 Casa Mia Dr
	San Jose,CA,95124	-	San Jose CA 95124
(Use attachments if necess	sary)		
	of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted)		
	uted in accordance with section 605,0203 the Department of State constitutes a thi		-
	- Endure	of an authorized person	
	Krista Ladd		
	Typed or	printed name of signee	

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: LADD PARTNERS LLC

FILE NUMBER:

201502810220

FORMATION DATE:

01/23/2015

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 21, 2017.

> ALEX PADILLA Secretary of State