5/29/2018

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : C T CORPORATION SYSTEM
 Account Number : FCA00000023
 Phone : (614)280-3338
 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one.email address please.

Email Address:_____

Foreign Limited Liability Company Maven Parc Holdings LLC

Certificate of Status		Ü
Certified Copy	```	1
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MAY 30 201A

Electronic Filing Menu

Corporate Filing Menu

Help

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

(Name of Fore	LC	•	•	
× .	ign Limited Liability Company; must include "Limited Liability Compa	ny," "L.L.C.," or "L	.l.c.")	
name unavailable, enter al ability Company," L.L.C.	emate name adopted for the purpose of transpeting husiness in Florida, or "LLC.")	The alternate name:	must include "Limit	ed
Delaware	3.			•
Jurisdiction under the law company is organized)	of which foreign limited liability (FE) num	ber, if applicable)		
Upon Registration				
	(Date first transacted business in Florida, if prior to registration (See sections 605,0904 & 605,0905, F.S. to determine penalty lieb	.)		
2800 Post Oak Blvd., S		·····		
Houston, Texas 77056				
	(Street Address of Principal Office)			•
Same as Above				٠, _
				_
	(Mailing Address)	,	<u>က်</u> ကြွ	-
Name and street address	s of Florida registered agent: (P.O. Box NOT acceptable)		700	
Name:	C. T Corporation System	•	3	
Office Address:	1200 South Pine Island Road		9.4.9	
	Plantation	33324	T->	
	(City), Florida	(Zip code)	•	
signated in this applica complywith the provisi	Asserved agent and to accept service of process for the above station. I hereby accept the appointment as registered agent and agons of all statutes relative to the proper and complete performancy position as registered agent. CT Corporation System (Registered agent's signature) (Registered agent's signature)	gree to act in this	capacity. I furthe and I am familiar	r agrec
,	city and address of the person(s) who has/have authority to mana-	ige is/are:	•	
,	city and address of the person(s) who has/have authority to mana-	ige is/arc:		
ines Maven Parc Associ	city and address of the person(s) who has/have authority to mana-	ige is/are:		
ines Maven Parc Associ	city and address of the person(s) who has/have authority to mana stes LP, sole member	ige is/arc:		
ines Maven Parc Associ	city and address of the person(s) who has/have authority to manastes LP, sole member c 4800, Houston, Texas 77056 of existence, no more than 90 days old, duly authoricated by the of which it is organized. (If the certificate is in a foreign language	e official having ca		



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAVEN PARC HOLDINGS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

1.5

6898634 8300 SR# 20184274012 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202758729

Date: 05-24-18