

M19000001071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

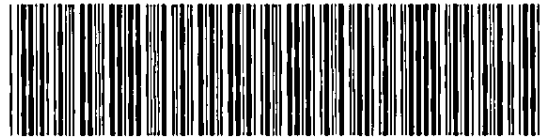
(Business Entity Name)

(Document Number)

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DATE: 1/30/19

NAME: SOBENY PARTNERS LLC

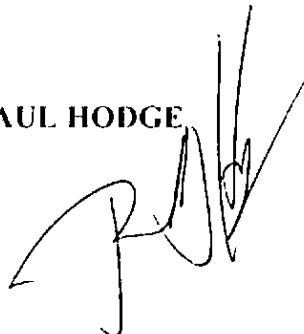
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AUTHORIZATION: ABBIE/PAUL HODGE



A handwritten signature in black ink, appearing to read 'Abbie/Paul Hodge', is written over the authorization text. The signature is stylized and cursive.

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SOBENY PARTNERS LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized)
3. 82-3038353 (FEI number, if applicable)

4. UPON QUALIFICATION
(Date first transacted business in Florida, if prior to registration. See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1200 OCEAN DR. (Street Address of Principal Office)
MIAMI BEACH, FL 33139
6. 1200 OCEAN DR. (Mailing Address)
MIAMI BEACH, FL 33139

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

Name: JIMMY CHATMON
Office Address: 1200 OCEAN DR.
MIAMI BEACH, Florida 33139
(City) (Zip code)

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TALLAHASSEE FLORIDA

Registered agent's acceptance:

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 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.

Jimmy Chatmon
(Registered agent's signature)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

Manager Name: EBOL HOLDINGS LLC

Member Address: 16 VERONICA LANE

Authorized FALMOUTH, ME 04105

Person _____

Other _____ Other _____

Title or Capacity: **Name and Address:**

Manager Name: JLC3 LLC

Member Address: 1200 OCEAN DR.

Authorized MIAMI BEACH, FL 33139

Person _____

Other _____ Other _____

Manager Name: THA HOLDINGS LLC

Member Address: 1200 OCEAN DR.

Authorized MIAMI BEACH, FL 33139

Person _____

Other _____ Other _____

Manager Name: Fortis Automotive Group LLC

Member Address: 111 BRICKELL AVE

Authorized MIAMI BEACH, FL 33129

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

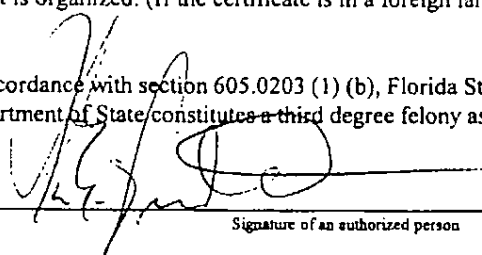
Person _____

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.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.



Signature of an authorized person

LANE FERDINAND

Typed or printed name of signee

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOBENY PARTNERS 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-EIGHTH DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOBENY PARTNERS LLC" WAS FORMED ON THE NINTH DAY OF OCTOBER, A.D. 2017.




Jeffrey W. Bullock, Secretary of State

6573640 8300

SR# 20190532906

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

Authentication: 202156783

Date: 01-28-19