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114464802 From James Tanks I
Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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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
Sauvage I.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

LO:3:14 03:11:3162

2019 JAN 30 AM 6:49
FILED
STATE OFFICE OF STATE
TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Sauvage I LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, state 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. California (Jurisdiction under the law of which foreign limited liability company is organized)

3. (FES number, if applicable)

4. (Date first transacted business in Florida, if prior to registration) (See section 603.0904 & 603.0905, F.S. to determine priority liability)

5. 7717 Formula Place (Street Address of Principal Office) San Diego, CA 92121

6. 7717 Formula Place (Mailing Address) San Diego, CA 92121

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

Name: NRAI Services, Inc. Office Address: 1200 South Pine Island Road Plantation, Florida 33324

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.

Signature of Scott White, Assistant Secretary (Registered agent's signature)

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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: Elizabeth Southwood

Member

Address: 7717 Formula Place

Authorized

San Diego, CA 92121

Person

Other

Other

Manager

Name: _____

Member

Address: _____

Authorized

Person

Other

Other

Manager

Name: _____

Member

Address: _____

Authorized

Person

Other

Other

Title or Capacity:

Name and Address:

Manager

Name: Simon Southwood

Member

Address: 7717 Formula Place

Authorized

San Diego, CA 92121

Person

Other

Other

Manager

Name: _____

Member

Address: _____

Authorized

Person

Other

Other

Manager

Name: _____

Member

Address: _____

Authorized

Person

Other

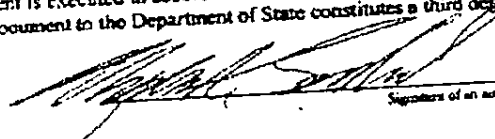
Other

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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

Elizabeth Southwood

Simon Southwood

Typed or printed name of signer

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: SAUVAGE I LLC

FILE NUMBER:	201901610667
FORMATION DATE:	01/09/2019
TYPE:	DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION:	CALIFORNIA
STATUS:	ACTIVE (GOOD STANDING)

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 SECRETARY OF STATE
 PALM SPRINGS, FLORIDA

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 January 23, 2019.

ALEX PADILLA
Secretary of State

RML