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Y SCOTT MAY **3**, 2019 CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee FL 33201

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195	
REFERENCE : 745505 4321	551
AUTHORIZATION : Spulle man	٠
COST LIMIT : \$ 128.00	_
ORDER DATE : April 30, 2019	
ORDER TIME : 9:09 AM	
ORDER NO. : 745505-005	2019 N SECI
CUSTOMER NO: 4321551	FIL 2019 HAY -1 SECKETARY ALLAHASSE
FOREIGN FILINGS	. ED PM 4: 30 Y OF STATE SET. FLORIDA
NAME: APPLEGREEN MANAGEMENT US, LLC	
XXXX QUALIFICATION (TYPE: <u>LL</u>)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	

EXAMINER:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

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:

			mpany," "LTLC.," or "LTC.")		
	area adopted for the purpose of transacting business in Pl	orida, The alterna	to mano areat include "Limited Lieb	Esy Company," "L.L.C." or	71.0.7
2. Delaware		3			
(Aurisdiction under the law of w	isch fbreign (insited lieblikty company is organized)	J	(FEI mumbe	r, if applicable)	
4					
	Deto first transacted beamous in Florida, if prior to (See sections 603,0904 & 605,0905, F.S. to determ	registration.) inc penalty liabili	ity)		
··	Lexington, SC 29072	6. 27	9 Codarcrost Drive, Lexi	ngton, \$C 29072	
(Street Address of I	Principal Office)		(Making Addre	P AS O	
				<u> </u>	
			·	A 25. A	_ 1
7. Name and street address	ss of Florida registered agent: (P.O. Box	. NOT	dar \$ 1 _ \$	ASS ASS	
The same same same wheel the		NOT ROCE	pianie)	ere Heren	- 1
Name:	Corporation Service Company		- -		i 1
Office Address:	1201 Hays Street			025 15 15 15 15 15 15 15 15 15 15 15 15 15	
	Tallahassee			- 著音 33	
	(City)		, Florida 32301	OE	
	Corporation Salvies Company (Registered spent's	fignature)	Assi	oxanne Turner t. Vice Preside	r ent
8. The name, title or caps	(Registered agent's	us/have auth	Ority to manage is/are:	t. Vice Preside	ent
Title or Capacity:	(Registered agent's acity and address of the person(s) who have and Address;	us/have auth	Assi	Name and Address	ent
8. The name, title or capa <u>Title or Capacity:</u> <u>President</u>	(Registered agent's city and address of the person(s) who he Name and Address: Elizabeth Pierce	us/have auth	Ority to manage is/are:	t. Vice Preside	ent
Title or Capacity:	(Registered agent's acity and address of the person(s) who have and Address;	us/have auth	Ority to manage is/are:	t. Vice Preside	ent
Title or Capacity:	(Registered agent's circly and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way	us/have auth	Ority to manage is/are:	t. Vice Preside	ent
Title or Capacity:	(Registered agent's circly and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way	us/have auth	Ority to manage is/are:	t. Vice Preside	ent
Title or Capacity:	(Registered agent's circly and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way	us/have auth	Ority to manage is/are:	t. Vice Preside	ent
President	(Registered agent's city and address of the person(s) who have and Address; Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12	us/have auth	Ority to manage is/are:	t. Vice Preside	ent
President (Use attachments if necess	(Registered agent's recity and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12	Title (Assi	Name and Addres	ent Si
President (Use attachments if necess Attached is a certificate urisdiction under the law of the l	Registered agent's city and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate	Title (Assi	Name and Addres	ent Si
President (Use attachments if necess Attached is a certificate surisdiction under the law of the translator must be su	Registered agent's city and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12 sary) of existence, no more than 90 days old, of which it is organized. (If the certification intended)	duly authent	ority to manage is/are: or Capacity: ticated by the official have beign language, a translation	Name and Addressing custody of records of the certificate u	ds in the
President (Use attachments if necess Attached is a certificate urisdiction under the law of the translator must be su 10. This document is exect	Registered agent's city and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate	duty authori	Assi	Name and Addressing custody of records of the certificate u	ds in the
President (Use attachments if necess Attached is a certificate urisdiction under the law of the translator must be su 10. This document is exect	Registered agent's city and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12 sary) of existence, no more than 90 days old, of which it is organized. (If the certification in accordance with section 605.020; the Department of State constitutes a the	duly authoric is in a force it (1) (b), Florid degree fe	Assi	Name and Addressing custody of records of the certificate u	ds in the
President (Use attachments if necess Attached is a certificate urisdiction under the law of the translator must be su 10. This document is exect	Registered agent's city and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12 sary) of existence, no more than 90 days old, of which it is organized. (If the certification intending the description of the Department of State constitutes a the description of the Department of State constitutes at the Department	duty authente is in a force irid degree fe	Assi	Name and Addressing custody of records of the certificate u	ds in the
President (Use attachments if necess Attached is a certificate urisdiction under the law of the translator must be su 10. This document is exect	Registered agent's city and address of the person(s) who have and Address: Elizabeth Pierce Block 17, Joyce Way Parkwest Dublin 12 sary) of existence, no more than 90 days old, of which it is organized. (If the certification in accordance with section 605.020; the Department of State constitutes a the	duly authoric is in a force	Assi	Name and Addressing custody of records of the certificate u	ds in the



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "APPLEGREEN MANAGEMENT US, 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 THIRTIETH DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APPLEGREEN MANAGEMENT US, LLC" WAS FORMED ON THE SIXTH DAY OF MARCH, A.D. 2019.

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





Authentication: 202737385

Date: 04-30-19

