

ML900000 6239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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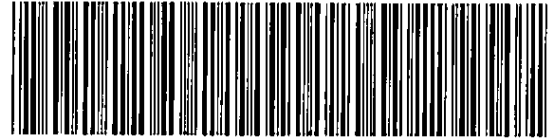
(Business Entity Name)

(Document Number)

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Z BROWN

JUN 27 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 821065 8210970  
AUTHORIZATION :   
COST LIMIT : \$ 125.00

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ORDER DATE : June 25, 2019

ORDER TIME : 7:44 PM

ORDER NO. : 821065-005

CUSTOMER NO: 8210970  
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FOREIGN FILINGS

NAME: NVA MILLER EQUINE MANAGEMENT  
, 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: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_

**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. NVA Miller Equine Management, 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. New York 3. 84-2082807  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. June 25, 2019  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. <u>29229 Canwood Street, Suite 100</u> (Street Address of Principal Office)	6. <u>29229 Canwood Street, Suite 100</u> (Mailing Address)
<u>Agoura Hills, CA 91301</u>	<u>Agoura Hills, CA 91301</u>

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

**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.*

Roxanne Turner  
Asst. Vice President

Roxanne Turner  
(Registered agent's signature)

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JUN 26 PM 4:00  
2019

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: Gregory W. Hartmann

☐ Member Address: 29229 Canwood St., Suite 100

☐ Authorized Agoura Hills, CA 91301

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Scott Shulman

☐ Member Address: 29229 Canwood St., Suite 100

☐ Authorized Agoura Hills, CA 91301

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Isaiah J. Robinson

☐ Member Address: 120 Nichols Road

☐ Authorized Brewster, NY 10509

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

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

☒ Manager Name: Brian Kelly

☐ Member Address: 29229 Canwood St., Suite 100

☐ Authorized Agoura Hills, CA 91301

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Christopher B. Miller

☐ Member Address: 120 Nichols Road

☐ Authorized Brewster, NY 10509

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

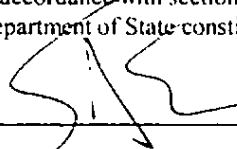
Person \_\_\_\_\_

☐ 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

Eric A. Smith, General Counsel

\_\_\_\_\_  
Typed or printed name of signer

**State of New York  
Department of State } ss:**

*I hereby certify, that NVA MILLER EQUINE MANAGEMENT, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/01/2019, and that the Limited Liability Company is existing so far as shown by the records of the Department.*



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 24th day of June  
two thousand and nineteen.*

A handwritten signature in black ink, reading "Whitney Clark". The signature is fluid and cursive, with the first name "Whitney" and last name "Clark" clearly distinguishable.

Whitney Clark  
Deputy Secretary of State