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Account#: 120000000088

Date:	08/01/2019	
	Joy Weaver	
	#:1113224	
Entity Nam	ne: TARPON TOWERS	MANAGEMENT, LLC
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✓ Artic	cles of Incorporation/Authorization t	o Transact Business
Ame	endment	
☐ Cha	inge of Agent	
☐ Reir	nstatement	
☐ Con	version	
☐ Mer	g e r	
☐ Diss	solution/Withdrawal	
☐ Fict	itious Name	
☐ Oth	er	
Authorized	Amount: \$125.00	
Signature:	Millauli	

F: +852,2682,9790



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☐ Cor	nversion	
☐ Mer	rger	
Diss	solution/Withdrawal	
☐ Fict	itious Name	
Oth	er	
Authorized Signature:	Amount:	

F: +852.2682.9790

COVER LETTER

TO:	Registration Section Division of Corporations			
	Tarpon Towers Management, LLC			
SUBJI	Name of Limited Liability Company			
The en	aclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," nce, and check are submitted to register the above referenced foreign limited liability company to transact busin	Certificate of less in Florida.		
Please	return all correspondence concerning this matter to the following:			
	Gail Buteau			
	Name of Person			
Tarpon Towers Holdings				
Firm/Company				
	1001 3rd Ave West Suite 420			
Address				
	Bradenton, FL 34205			
City/State and Zip Code				
	gbuteau@tarpontowers.com			
	E-mail address: (to be used for future annual report notification)	20		
For further information concerning this matter, please call:		2019 AUG		
	Gail Buteau at (941) 757-5010	1		
	Name of Contact Person Area Code Daytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	AM 10: 52		
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE			
	\$125.00 Filing Fee \$\int \\$130.00 Filing Fee & \$\int \\$155.00 Filing Fee & \$\int \\$160.00 Filing I \\ Certificate of Status Certified Copy of Status & Cert	,		

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Tarpon Towers Management, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, coper alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") (Jurisdiction under the law of which foreign limited liability company is organized) June 1, 2019 (Date first transacted business in Flurida, if prior to registration.)
(See sections 605.0904 & 605.0905. F.S. to determine penalty liability) 1001 3rd Ave West 1001 3rd Ave West (Street Address of Principal Office) (Mailing Address) **Suite 420** Suite 420 Bradenton, FL 34205 Bradenton, FL 34205 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. Name: Office Address: 115 North Calhoun St. Suite 4 _, Florida <u>32301</u> (Zio code) <u>Tallahassee</u> 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.

8. For initial indexing purposes, fist names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Brett Buggeln Gail Buteau ■ Manager Name: Manager Name: 1001 3rd Ave West 1001 3rd Ave West Address: _ 🔀 Member Address: |X|Member Suite 420 Suite 420 Authorized Authorized Bradenton, FL 34205 Bradenton, FL 34205 Person Person Other_ Other____ Other Other_ William T Freeman Ronald Bizick ✓ Manager Manager Name: 1001 3rd Ave West 1001 3rd Ave West [X]Member Address: Member Address: Suite 420 Suite 420 ☐ Authorized Authorized Bradenton, FL 34205 Bradenton, FL 34205 Person Person Other_ Other____ Other__ Other Manager Manager Member Address: Member Address: _ Authorized Authorized Person Person Other Other____ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.



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

DELAWARE, DO HEREBY CERTIFY "TARPON TOWERS MANAGEMENT, 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 THIRTY-FIRST DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TARPON TOWERS MANAGEMENT, LLC" WAS FORMED ON THE THIRTIETH DAY OF JULY, A.D. 2019.

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

And of the state o

Authentication: 203324804

Date: 07-31-19