10/3/2019

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067

Phone Fax Number

Email Address:

: (845)425-0077 : (845)818-3588

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Foreign Limited Liability Company Treesdale Holdings LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

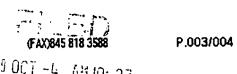
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Corporate Filing Menu

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OCT 7 2019



2019 OCT -4 AM 10: 27 SECALTANT OF STATE TALLAHASSEE, FL

APPLICATION BY FOR	REIGN LIMITED LIABILITY COMPANY IN FLORID	FOR AUTHORIZATION TO TRANSACT BUSINESS
IN COMPLIANCE WITH SECTION COMPANY TO TRANSACT BUS	ON 605.0902, FLORIDA STATUTES, THE FOLLOWI INESS IN THE STATE OF FLORIDA:	NG IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
Treesdale Holdings LLC		(C ''w "  1 C ")
(Name of Foreign Li	mited Liability Company; must include "Limited Liabili	y Company, L.D.C., or LDC. )
(If name unavailable, ones alternate part	ne adopted for the purpose of transacting business in Florida. The	thermate name must include "Limited Liability Company," "L.L.C." or "LLC.")
Delawarc 2.	h foreign familied liability company is organized)	(PEI number, if applicable)
(Jurisdiction under the law of water	by gouerillary practical consistency as configuration as configurations.	
4	(Date first transacted business in Florida, if prior to registratic (See sections 603 0904 & 603 0905, F.S. so determine panali	a.) Libility)
270 Madison Avc. Suite	1500	270 Madison Avc. Suite 1500
5. (Street Address of Pr		(Meibing Address)
		New York NY 10016
New York NY 10016		New Tolk 141 10010
7. Name and street address	s of Florida registered agent: (P.O. Box NOT	_acceptable)
Name:	Vcorp Services, LLC	
Office Address:	5011 South State Road 7, Suite 106	<del></del>
	Davie	33314
	Davic (City)	, Florida(Zip code)
	(CR)	
designated in this applica	gistered agent and to accept service of proce tion, I hereby accept the appointment as regi ions of all statutes relative to the proper and s s of my position as registered agent.	is for the above stated limited liability company at the place stered agent and agree to act in this capacity. I further agree complete performance of my duties, and I am familiar with
	ni	, mila
	(Registered agent's signatur	

Madison Ave. Suite 1500	☐ Manager ☐ Member ☐ Authorized Person	Address:		
<del></del>	☐ Authorized			
	Person			
Other			Other	
	Manager	Name:		
	☐ Member	Address:		
	☐ Authorized			
	Person			
			Other	
			seo	5113
	Manager	Name:	台灣	001-
	☐ Member	Address:	<u> </u>	<u> </u>
	☐ Authorized		<u></u>	<u> </u>
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Other				
	to the index when tiling your ric	Member   Authorized   Person   Other   Other   Manager   Member   Authorized   Person   Other   Othe	Member Address:	Member Address:

## **Delaware**

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The First State

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

DELAWARE, DO HEREBY CERTIFY "TREESDALE HOLDINGS 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 THIRD DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREESDALE HOLDINGS LLC" WAS FORMED ON THE FOURTMENTH DAY OF AUGUST, A.D. 2019.

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

Authentication: 203722594

Date: 10-03-19