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(Re	questor's Name)	·
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

Registration Section
Division of Corporations

UBJECT: _			ited Liability Company	
he enclosed ". xistence, and	Application by Fore check are submitted	ign Limited Liability Company to register the above reference	for Authorization to Transact Business in Florida," Cered foreign limited liability company to transact business in	tificate o n Florida
ease return al	II correspondence co	oncerning this matter to the follo	owing:	
	Gregory Scott			
		Name	of Person	
	c/o Bergen Asse	t Management, LLC		
		Firm/	Company	
	1800 N. Military	; Trail, Suite 150	•	
		A	ddress	
	Boca Raton, Flo	rida 33431		
		City/State	and Zip Code	
	alexis.johnson@b	_		
	-	E-mail address: (to be used for	r future annual report notification)	
or further info	ormation concerning	this matter, please call:		
Grego	ory Scott	a	212 488-2562	3
	Name of	Contact Person	Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations	
	LING ADDRESS:		STREET ADDRESS:	3
	ion of Corporations		Division of Corporations Registration Section	1
_	tration Section Box 6327		Clifton Building	0
	hassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301	:: :: :ಎ
		e following amount: le to: FLORIDA DEPARTMI		0
	125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee,	

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 TAMITED LIABILITY COMPANYTOTRANSACT BY INDESS IN THE STATE OF FLORIDA:

me unavailable, enter alternate na Delaware		_		
elaware	ame adopted for the purpose of transacting business in Flo	xida. The alto	rnate name must include "Limited Liability Com	pany," "L.L.C," or "LLC
			26-1452093	
(Jurusdiction under the law of wh	nich foreign limited liability company is organized)	٥	(FEI number, if appli	icable)
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determine	registration.) tine penalty li	ability)	
1800 N. Military Trail,	. Suite 150		1800 N. Military Trail, Suite 150	
(Street Address of P	rincipal Office)	0	(Mailing Address)	
		-	Goca Raton, Florida 33431	2
	ss of Florida registered agent: (P.O. Box	-		2019 NOV -
Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	-		2019 HOY -7 PH
Name:	Eugene Tablis 1800 N. Military Trail, Suite 150	-		2019 NOV -7 PH 4: 31

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: Title or Capacity: Name and Address: Eugene Tablis Name: Name: ____ Manager Manager | 1800 N. Military Trail Address: Member ■ Member Address: _____ Suite 150 Authorized ☐ Authorized Boca Raton, Florida 33431 Person Person Other____ Other Other Other Name: _____ Manager Manager Member Member Address: ____ Address: _____ Authorized Authorized Person Person Other Other__ Other Other Manager ☐ Manager Name: Member ☐ Member Address: Address: Authorized Authorized Person Person Other 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. EZH Holdings (DE), LLC By: Signature of an authorized person Eugene Tablis, Sole Manager

Typed or printed name of signce

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT "EZH HOLDINGS (DE), LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR
REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY
AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE THIRTEENTH DAY OF NOVEMBER, A.D. 2007, AT 11:16 O'CLOCK A.M.

CERTIFICATE OF AMENDMENT, FILED THE FIFTH DAY OF NOVEMBER, A.D. 2008, AT 12:56 O'CLOCK P.M.

CERTIFICATE OF CHANGE OF REGISTERED AGENT, FILED THE SECOND DAY OF OCTOBER, A.D. 2014, AT 5:58 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "EZH HOLDINGS (DE), LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EZH HOLDINGS (DE), LLC" WAS FORMED ON THE THIRTEENTH DAY OF NOVEMBER, A.D. = 2007.

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Authentication: 203371335

Date: 08-07-19

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Delaware The First State

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



Authentication: 203371335

Date: 08-07-19

4456199 8310 SR# 20196398117

You may verify this certificate online at corp.delaware.gov/authver.shtml