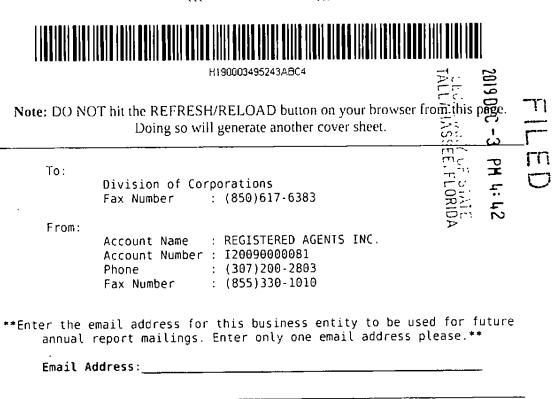
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Foreign Limited Liability Company PAC-1980 Lake Fountain GP, LLC

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

IN COMPILANCE 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:

(Name of Foreign L	imited Liability Company; must include "Limite	ed Liability Compar	1y," "L.L.C.," or "LLC.")			
•						
one on weilable, onter alternate na	me adopted for the purpose of transacting business in Flo	rida. The alternate par	ne must include "Earnted Liability	Complex "L.L.C." (a "LLC	5	
	and the first of t			35E	1	
Delaware		3.	-3335159	Controller =	1	
(Jurisdiction under the law of whi	ch foreign limited liability company is organized)	•	(r at buinger, ta	O.T.		
				記る		
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration)				
7001 4th C			71 1th Ct N			
7901 4th S		6. 790	_{6.} <u>7901 4th St N</u>			
(Street Address of Pr	meipal Office)		(Mailing Address)			
STE 300		STE 300				
	FL 00700	<u> </u>	Datavahuva l	EL 22702		
St. Petersburg FL 33702		St.	St. Petersburg FL 33702			
	TEL Steven Second seconds (D.O. Dox	v NOT agganta	blav			
Name and street address	s of Florida registered agent: (P.O. Box	k <u>NOT</u> accepia	oic j			
	Pagistared Agent	te Inc				
Name:	Registered Agent	13 1110.				
	7901 4th St N ST	F 300				
Office Address:	7,001 4(1) 0(1) 01					
	St. Petersburg		. Florida 33702			
	(Cuy)		, Florida(Zip code)	-un-in		
gistered agent's accept iving been named as rei	gistered agent and to accept service of	process for the	above stated limited lia	ibility company at th	e p	
denated in this applicat	tion. I hereby accept the appointment of	as registered ag	ent and agree to act in .	this capacity. I furt	her	
comple with the provisi.	ons of all statutes relative to the prope	r and complete	perjormance oj my aut	цез, апа г ат зати	47	
d accept the obligations	of my position as registered agent.					

(Registered agent's signature)

Title or Capacity:	Name and Address:	Title or Capacity	<u>::</u>	Name and Address:
Manager	Name: Pacific Ardent Capital, LLC	Manager	Name:	
Member	Address: 8 The Green Suite R	Member	Address: _	ALL:
Authorized	Dover DE 19901	Authorized		DEC -3
Person		Person		mi-i n
Other	Other	Other		ORIUGE 12
☐Manager	Name:	Manager	Name:	7
Member	Address:	Member	Address: _	
Authorized		Authorized		
Person		Person		
Other	Other	Other		Other
☐Manager	Name:	☐ Manager	Name:	,
Member	Address:	Member	Address: _	
Authorized		Authorized		
Person		Person		
Other	Other	Other		Other
9. Attached is a cer jurisdiction under to of the translator mu.	is executed in accordance with section 605.02 iment to the Department of State constitutes a t	Florida Department of Sta I, duly authenticated by the ate is in a foreign langua, 03 (1) (b), Florida Statut	ate Annual Rej he official hav ge, a translatio es. I am aware ovided for in s.	oort form. ing custody of records in the n of the certificate under oath that any false information

Lyped or primed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PAC-1980 LAKE FOUNTAIN GP, 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 DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PAC-1980-L
FOUNTAIN GP, LLC" WAS FORMED ON THE TENTH DAY OF OCTOBER, ALD
2019.

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

Authentication: 204123620

Date: 12-03-19