NRCOCCO 341

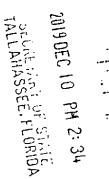
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600337839076

12/10/19--01018---010 **125.00



To when it may concern -

Please find enclosed an application for Eagle

Peak Copital Partners LLC to operate in

Florida, along with a check and certificate

of good standing from the State of Deloware.

Sincerdy.

Robert Knauer

Principal

Eagle Peak Copital Porthers

COVER LETTER

p:	agle Peak Capital I	Partners LLC					
SUBJECT:		Name of l	Limited Liability (Company			
The enclosed "A Existence, and c	application by Fore heck are submitted	rign Limited Liability Comp I to register the above refere	oany for Authoriza meed foreign limit	tion to Tran ed liability	isact Business in Flori company to transact t	ida," Certific ousiness in F	ate of lorida.
Please return all	correspondence c	oncerning this matter to the	following:				
	Robert Knauer						
		N	ame of Person				
	Eagle Peak Cap	pital Partners					
		F	irm/Company				
	777 Brickell A	venue, Suite 500					
			Address			로 :	701
	Miami, FL 33					L C.	7019 DEC 10
		City/S	State and Zip Code	:		HAS	0 -
	iknauer@eaglep	eakcap.com) SET :	0 -
		E-mail address: (to be use	ed for future amua	il report not	ification)	<u>ت</u>	₹ .
For thether info	amation concernin	g this matter, please call:				FLORIDI	PM 2: 34
Robe	nt Knawer		at (Æ
	Name (of Contact Person	Area Code	e Day	time Telephone Num	ber [.]	
Divisi Regis P.O. I	LING ADDRESS: ton of Corporation tration Section Box 6327 tassee, FL 32314			Division Registrat Clifton B 2661 Exc	ADDRESS: of Corporations ion Section milding secutive Center Circle see, FL 32301		
	theck for the follow 25.00 Filing Fee	ving amount: \$\Begin{align*} \text{S130.00 Filing Fee & Certificate of Status} \end{align*}	□ \$155,00 Fil Certified Cop	-	☐ \$160.00 Filing F of Status & Certific		ite

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

IN COMPILANCE WITH SECTION 605.002, FIGRIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Limited Liability Company, must include *Lim		,,,,,,,	
If name unavailable, enter alternate n	ame adopted for the purpose of transacting bininess in	Florida. The alternate	name must include Limited Liab	dity Company," "L.L.C," or "LLC.")
Delaware		3.		
(Jurisdiction under the law of w	uch foreign limited liability company is organized)		(FEI numb	er, if applicable)
I,				
·	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905; F.S. to dete	to registration.)	e)	
777 Brickell Avenue,		77	7 7 Brickell Avenue, Suite	: 500
(Speet Addless of F		6	(Mailing Addr	
Miami, FL 33131		Mi	ami, FL 33131	
Name and street address	of Florida registered agent: (P.O. B	ox <u>NO</u> T_acce _l	ptable)	20191 TĂLL
Name:	Robert Knauer		<u></u>	DEC
Office Address:	777 Brickell Avenue, Snite 500			SS. Ho
	Miami		Florida(Zap code	tic →
	(Cm)		(Zip code	o − − − − − − − − − − − − − − − − − − −
	s of my position as registered agent	er and comple 7 . •)	ete performance of my (duties, and Lam familliar w
	s of my position as registered agent	1/	ete performance of my (duties, and∫aṁ faṁilliar w
		1/	ele performance of my (duties, an∰ aṁ faṁiliar »
and accept the obligation	s of my position as registered agent	has/have auth		duties, and∫am familiar w
and accept the obligation 8. The name, title or cape	s of my position as registered agent (kenword agent acity and address of the person(s) who Name and Address:	has/have auth	ority to manage is/are:	<u> </u>
8. The name, title or caparity:	s of my position as registered agent (Rejutated agent acity and address of the person(s) who	has/have auth	ority to manage is/are:	<u> </u>
8. The name, title or cape	(kenward agentality and address of the person(s) who Name and Address: Robert Knauer 777_Brickell_Ayenue_\$\text{\$\text{\$\text{\$\text{\$}}}\$}	has/have auth	ority to manage is/are:	<u> </u>
8. The name, title or cape	(kenward agentality and address of the person(s) who Name and Address: Robert Knauer 777_Brickell_Ayenue_\$\text{\$\text{\$\text{\$\text{\$}}}\$}	has/have auth	ority to manage is/are:	<u> </u>
8. The name, title or cape	Robert Knauer 777 Brickell Ayenue, Sumiami, FL 33131	has/have auth	ority to manage is/are:	<u> </u>
8. The name, title or caparity: Principal (Use attachments if neces	Robert Knauer 777 Brickell Ayenue, Sumiami, FL 33131	has/have auth Title o	ority to manage i√are: or Capacity:	Name and Address:
8. The name, title or capacity: Principal (Use attachments if neces	Robert Knauer 777 Brickell Avenue, Sumiami, FL 33131 soary) e of existence, no more than 90 days of of which it is organized. (If the certifi	has/have authorities 500	ority to manage is/are: or Capacity: ticated by the official ha	Name and Address:
8. The name, title or cap. Title or Capacity: Principal (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be seen	Robert Knauer 777 Brickell Ayenue Sumiami, rL 33131 soary) e of existence, no more than 90 days of of which it is organized. (If the certificulumitted)	has/have authorities of the 500 dd. duly authen cate is in a fore 203 (1) (b). Flo	ority to manage is/are: or Capacity: ticated by the official had beign language, a translate orida Stanites, I am awar	Name and Address: Iving custody of records in a control of the certificate under that any false information
8. The name, title or cape Title or Capacity: Principal (Use attachments if necessity in the capacity in the translator must be severed.)	Robert Knauer 777 Brickell Ayenue, Sumiami, FL 33131 seary) rof existence, no more than 90 days of of which it is organized. (If the certifinal intention)	has/have authorities of the 500 dd. duly authen cate is in a fore 203 (1) (b). Flo	ority to manage is/are: or Capacity: ticated by the official had beign language, a translate orida Stanites, I am awar	Name and Address: Iving custody of records in a control of the certificate under that any false information
8. The name, title or cap. Title or Capacity: Principal (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be seen	Robert Knauer 777 Brickell Ayenue, Sumiami, rt. 33131 soary) e of existence, no more than 90 days of of which it is organized. (If the certification in accordance with section 605.0 to the Department of State constitutes a	has/have authorities of the 500 dd. duly authen cate is in a fore 203 (1) (b). Flo	ority to manage is/are: or Capacity: ticated by the official ha eign language, a translat orida Statutes, I am awar elony as provided for in	Name and Address: Iving custody of records in a control of the certificate under that any false information
8. The name, title or cap. Title or Capacity: Principal (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be seen	Robert Knauer 777 Brickell Ayenue, Sumiami, rt. 33131 soary) e of existence, no more than 90 days of of which it is organized. (If the certification in accordance with section 605.0 to the Department of State constitutes a	has/have authorities 500 d. duly authen cate is in a foresthird degree for	ority to manage is/are: or Capacity: ticated by the official ha eign language, a translat orida Statutes, I am awar elony as provided for in	Name and Address: Iving custody of records in a control of the certificate under that any false information
8. The name, title or cape Title or Capacity: Principal (Use attachments if necessity in the capacity in the translator must be severed.)	Robert Knauer 777 Brickell Ayenue, Sumiami, rt. 33131 soary) e of existence, no more than 90 days of of which it is organized. (If the certification in accordance with section 605.0 to the Department of State constitutes a	has/have authorities 500 d. duly authen cate is in a foresthird degree for	ority to manage is/are: or Capacity: ticated by the official ha eign language, a translat orida Statutes, I am awar elony as provided for in	Name and Address: Iving custody of records in a control of the certificate under that any false information

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EAGLE PEAK CAPITAL PARTNERS 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 FOURTEENTH DAY OF NOVEMBER, A.D. 2019.

ZOTS DECTO FM 2:34 SECOLUMN Ch SIME TALL MHASSEF, FLORIDA

Authentication: 204006657

Date: 11-14-19

7441138 8300 SR# 20197911562