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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614) 280-3338  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

Foreign Limited Liability Company  
Seidler Kutsenda Management Company, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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538  
1/24/20

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 LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Seidler Kutsenda Management Company, LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC."

2. California  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 75-3143904  
(F.E.I. number, if applicable)

4. N/A  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4640 Admiralty Way, Suite 1200  
(Street Address of Principal Office)

6. 4640 Admiralty Way, Suite 1200  
(Mailing Address)

Marina del Rey, California 90292

Marina del Rey, California 90292

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

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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.

*Angel Shearer*

Angel Shearer, Assistant Secretary

(Registered agent's signature)

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Jonelle Jue</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Eric Kutsenda</u>
<input type="checkbox"/> Member	Address: <u>Seidler Kutsenda Management Company, LLC</u>	<input checked="" type="checkbox"/> Member	Address: <u>Seidler Kutsenda Management Company, LLC</u>
<input checked="" type="checkbox"/> Authorized	<u>4640 Admiralty Way, Suite 1200</u>	<input type="checkbox"/> Authorized	<u>4640 Admiralty Way, Suite 1200</u>
Person	<u>Marina del Rey, California 90292</u>	Person	<u>Marina del Rey, California 90292</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Manager	Name: <u>Matthew Seidler</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Peter Seidler</u>
<input checked="" type="checkbox"/> Member	Address: <u>Seidler Kutsenda Management Company, LLC</u>	<input checked="" type="checkbox"/> Member	Address: <u>Seidler Kutsenda Management Company, LLC</u>
<input type="checkbox"/> Authorized	<u>4640 Admiralty Way, Suite 1200</u>	<input type="checkbox"/> Authorized	<u>4640 Admiralty Way, Suite 1200</u>
Person	<u>Marina del Rey, California 90292</u>	Person	<u>Marina del Rey, California 90292</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Manager	Name: <u>Robert Seidler</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>Seidler Kutsenda Management Company, LLC</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>4640 Admiralty Way, Suite 1200</u>	<input type="checkbox"/> Authorized	_____
Person	<u>Marina del Rey, California 90292</u>	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

Jonelle Jue  
Signature of an authorized person

Jonelle Jue  
Typed or printed name of signer

2020 Jan 23 PM 1:01

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

ENTITY NAME: SEIDLER KUTSENDA MANAGEMENT COMPANY, LLC

FILE NUMBER: 200336410016  
FORMATION DATE: 12/24/2003  
TYPE: DOMESTIC LIMITED LIABILITY COMPANY  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this  
certificate and affix the Great Seal  
of the State of California this day of  
January 22, 2020.

*Alex Padilla*

ALEX PADILLA  
Secretary of State

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