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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077

Fax Number : (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.

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Foreign Limited Liability Company PAC Parkside at the Beach, LLC

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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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	PAC Parkside at the Be (Name of Foreign	ach, LLC Limited Liability Company; must include "Li	imited Liabilit	y Company," "L.L.C.," or "LLC."	<u> </u>	-
<u></u>	uuno unavailable, enter niternato u	min adapted for the purpose of transacring business i	n Florida The a	ternate come ness include "Limited Lie	bility Company," "1, 1, C," or "I I	.C.")
						·
2	Delaware (Junadiction under the law of w.	tion foreign limited liability company is organized)	3.	(PEI num	ber, if applicable)	_
4.	January 30, 2020					
•		(Date first transacted business in Florida, if pri (See sections 605 0904 & 605,0905, P.S. to de	or to registration termine penulty	linbility)		5.50
5	3284 Northside Parkw (Since Address of F	ay, N.W., Suite 150	6	3284 Northside Parkway, Meiling Add	N.W., Suite 150	7
٠.	(Street Address of F	rincipal Office)		(Mailing Add	ireas)	
	Atlanta, GA 30327			Atlanta, GA 30327		
					<u> </u>	یت ن
					N.W., Suite 150	THE THE PARTY OF THE POST OF T
7.	Name and street address	s of Plorida registered agent: (P.O. I	Box <u>NOT</u> :	acceptuble)		
	Name:	Vcorp Services, LLC			,	
	Office Address:	5011 South State Road 7, Suite 106	5			ر ارت ا
	Office Address.			21214		
		Davie (City)		, Florida 33314 (Zap coa		
Re	gistered agent's accep			(rap to	-,	
		(हमूर्घायस्य ग्र	eni's signaturo)	. Much		
۰	eru atat	oten and address of the appear (A ash	a haadharra	authority to manage is/one:		
8.	Title or Capacity:	icity and address of the person(s) wh <u>Name and Address:</u>		the or Capacity:	Name and Address	<u>:</u>
	Manager	PAC Carvoout, LLC				
		3284 Northside Parkway, N.W., Atlanta, GA 30327	Suite			
			·			
						
(L	ise attachments if neces	sary)				
jur	Attached is a certificate is diction under the law the translator must be so	of existence, no more than 90 days of which it is organized. (If the certifulpinitted)	old, duly au ficate is in s	thenticated by the official h I foreign language, a transla	aving custody of record tion of the certificate ur	s in the ider oath
10 sul	. This document is exceptionitted in a document to	uted in accordance with section 605.6 the Department of State constitutes	0203 (J.) (b) a third degr), Florida Statutes. I am awa ree felony as provided for in	re that any false informa s.817.155, F.S.	ation
		Sign	ានដី គេ១ នៅ ការប៉ះ	onred person		
		Jeffrey Sprain				
			pod or printed na	ino of signee	·············	

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "PAC PARKSIDE AT THE BEACH, 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 FOURTH DAY OF FEBRUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PAC PARKSIDE AT THE BEACH, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF JANUARY, A.D. 2020.

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



7828529 8300 SR# 20200785979

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

JacTiny W. Bullinco, Secretary of Blate

Authentication: 202316800

Date: 02-04-20