Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000259103 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 : (855)498-5500 Phone Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TREZ FORMAN CAPITAL FLORIDA FUNDING, LLĈ

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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Corporate Filing Menu

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cov	ER LETTE	R H230002591
ΓO: Registration Section Division of Corporations		
SUBJECT: Trez Forman Capital Florida Funding,		
Name of Foreign	n Limited Liability	Company
Dear Sir or Madam:		
The enclosed application, certificate and fee(s)	are submitted for f	iling.
Please return all correspondence concerning this	s matter to the foll	owing:
Christina T. Rodriguez		
Name of Person		
Haynes and Boone, LLP		
Firm/Company		
2323 Victory Avenue, Suite 700		
Address		
Dallas, Texas 75219		
City/State and Zip Code		
notices@trezcapital.com		
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter,	nlesse call:	
ocl Oakden	604 67	78.1838
Name of Person	Area Code & I	Daytime Telephone Number
Mailing Address:	Stre	et Address:
Registration Section		ristration Section
Division of Corporations	Div	ision of Corporations
P.O. Box 6327		Centre of Tallahassee
Tallahassee, FL 32314		5 N. Monroe Street, Suite 810 lahassee, FL 32303
Enclosed is a check for the following a	imount:	
□\$25 Filing Fee □ \$30 Filing Fee &	\$55 Filing Fee	
Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

H23000259103

SECTION 1 (1-4 must be completed)

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8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:							
itle/ Capacity	<u>Name</u>	Address T	ype of Action				
resident	Brett Forman	1501 Corporate Drive, Suite 240					
		Woolbright Executive Center					
		Boynton Beach, Florida 33426	=Remove				
ecretary	Brett Forman	1501 Corporate Drive, Suite 240	□Add				
		Woolbright Executive Center					
		Boynton Beach, Florida 33426	_ = Remove				
			□Add				
			_ □Remove				
			□Add				
			_ □Remove				
			□Add				
aforemention	ed amendment(s), duly authentic nder the law of which this entire	than 90 days old, evidencing the cated by the official having custody of records in the is organized. It has at the authorized representative Christian Skogen Chief Risk Officer	_ □Remove				

Filing Fee: \$25.00 4871.4921.7905

H23000259103



Page 1

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

DELAWARE, DO HEREBY CERTIFY "TREE CAPITAL FLORIDA FUNDING, 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 TWENTY-FOURTH DAY OF JULY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREZ CAPITAL FLORIDA FUNDING, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2016.

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

Authentication: 203813024

Date: 07-24-23

SR# 20233069951
You may verify this certificate online at corp.delaware.gov/authver.shtml

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