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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I2000000088

Date:	10/14/2020		
	Marcel Ogbonna-	-Amu	
Reference #	1276836		
Entity Name	sou	THPARK OFFICE PM, LLC	
✓ Articl		thorization to Transact Business	10200T 15
<u> </u>	nge of Agent		ANY ISSUES, CALLO MARCEL: (518) 213 - 0826
_	rersion		Thank you!
Merg	er		
☐ Disso	olution/Withdrawal		
☐ Fictiti	ious Name		
✓ Othe	r	CERTIFIED COPY OF THE FILING	
Authorized A	Amount: \$1	55.00	
Signature:	117111 2000 04	borner time	

F: +852.2682.9790

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

IN COMPILANCE WITH SECTION 005,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Southpark Office PM, I	Linnted Liability Company; must include "Limited	Liability	Company," "L.L.C.," or "LLC.	.")		
(If name unavailable, enter alternate r	ame adopted for the purpose of transacting business in Flo	ırıda The	alternate name must include "Limited	d Liability Compar	ıy," "l. 1.,	C," or "1,1,C."
Delaware			85-3376216			
	hich foreign limited liability company is organized)	3.	(Fig. 1)			
(Jurisdiction under the law of w	high foreign limited liability company is organized)		(Flyl m	umber, il applicabl	c)	
4						
	(Date first transacted business in Florida, if prior to a (See sections 605,0904) & 605 0905, F.S. to determine	registration ne penalty	liability)			
5482 Wilshire Blvd. Suite 1923		6	5482 Wilshire Blvd, Suite			
5. (Street Address of Principal Office)		0.	(Mailing Address)			
Los Angeles, CA 9003	6		Los Angeles, CA 90036			
<u> </u>				5	2829	
				- 200	<u>);;</u>	
7. Name and street addres	s of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)	<i>(</i> /, .	U I	-
					<u> </u>	
v.	Cogency Global Inc.				PII 4: 45	
Name:				<u> 22</u> 5 a	Ö	
Office Address:	115 North Calhoun Street, Suite 4			.ee		
	Tallahassee		32301			
	(City)		, Florida(Zip code			

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.

Nathan Mullins, Asstl Sec. of COGENCY GLOBAL INC.

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}:

□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	■Manager	Name: Andrew Broeren	□Manager	Name: RMN Investment Holdings, LLC
Dathorized Los Angeles, CA 90036 Dauthorized Baltimore, MID 21202	□Member	\$100 William Direct 1000	■Member	1020 N. Calvert St
Person Person Other Othe	□Authorized	Los Angeles, CA 90036	□Authorized	Baltimore, MD 21202
□Manager Name: Guardian Residential, LLC □Manager Name: □Manager □Manager □Manager □Manager Name: □Manager <td>Person</td> <td></td> <td>Person</td> <td></td>	Person		Person	
■Member Address: 5482 Wilshire Blvd, Suite 1923 □Authorized Los Angeles, CA 90036 □Authorized Person Person □Authorized □Other □Other □Other □Manager Name: Knightsbridge Capital Ventures, LLC □Manager Name: □Manager ■Member Address: □Member □Authorized □Authorized Person Person	□Other	Other	□Other	Other
Person Person Person Other	□Manager	Name:Guardian Residential, LLC	□Manager	Name:
Person Person Person Other	■Member	Address: 5482 Wilshire Blvd, Suite 1923	□Member	Address: 7777
□Other □Other □Other □Other □Other □Other □Other □Other □□Other □□Oth	□Authorized		□Authorized	
□Other □Other □Other □Other □Other □Other □Other □Other □□Other □□Oth	Person		Person	
□Manager Name: Knightsbridge Capital Ventures, LLC □Manager Name: ■Member Address: P.O. Box 5340 □Member Address: □Authorized Montecito, CA 93108 □Authorized Person Person	□Other	Other	□Other	Other
□Manager Name: □Manager Name: ■Member Address: □Member Address: □Authorized □Authorized □Authorized Person Person				80 5
Person Person Person Person	□Manager	Name: Knightsbridge Capital Ventures, LLC	□Manager	Name:
Person Person Person	■Member	Address: P.O. Box 5340	□Member	Address:
	□Authorized		□Authorized	
Floribus Floribus Floribus Floribus	Person		Person	
Other Dother Dother	□Other	Other	□Other	Other

<u>Important Notice</u>: 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.

Speces		
710	Signature of an authorized person	
Andrew Broeren, Manager		
	Typed or printed name of signee	

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SOUTHPARK OFFICE PM, 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 OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTHPARK OFFICE PM, LLC" WAS FORMED ON THE SEVENTH DAY OF OCTOBER, A.D. 2020.

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

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Authentication: 203860329

Date: 10-14-20

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