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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT	NO.	:	I20000000195
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REFERENCE: 459438 4369500

AUTHORIZATION : Squell de la s

COST LIMIT : \$ 125-700

ORDER DATE: October 16, 2020

ORDER TIME : 12:12 PM

ORDER NO. : 459438-010

CUSTOMER NO: 4369500

FOREIGN FILINGS

NAME: CLEAR SIGHT PARTNERS

HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

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:

L CLEAR SIGHT PART	TNERS HOLDINGS, LLC		
(Name of For	eign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or	r"LLC.")	
(If name unavailable, enter a Liability Company," "L.L.C	lternate name adopted for the purpose of transacting business in Florida. The alternate name or "LLC.")	me must include "Lim	ited
2. Delaware	3		
(Jurisdiction under the law company is organized)	of which foreign limited liability 3. (FEI number, if applicable	9	
4. Upon qualification			
-	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	-	
5. 2001 N Main St #650.	Walnut Creek, CA 94596		
		75. 200	
	(Street Address of Principal Office)	OCT CALLA	71
6. same as street add	iress	- 3	!-
<u> </u>		_ <u>[7]</u> = ==	
	(Mailing Address)	5	
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT acceptable)	All lo: Ou	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahassee , Florida 32301 (City) (Zip code)		
Registered agent's accep	(City) (Zip code)	_	
Having been named as re	gistered agent and to accept service of process for the above stated limited liabi	lity company at the	place
to complywith the provision	tion, I hereby accept the appointment as registered agent and agree to act in the ons of all statutes relative to the proper and complete performance of my duties	is capacity. I furthe , and I am familiar	r agree with and
accept the obligations of i	ny position as registered ageny.	•	
	By Monda & Alliner	- Amanda Robins	
	(Registered agent's signature)	Asst. Vice Presidi	ON Ant
	city and address of the person(s) who has/have authority to manage is/are:		
Gus Spanos, President - 20	001 N Main St #650, Walnut Creek, CA 94596		
9. Attached is a certificate jurisdiction under the law of	of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (If the certificate is in a foreign language, a translation of	custody of records in	n the
of the translator must be su	bmitted)		
	7-09	_	
	Signature of an authorized person		
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any the Department of State constitutes a third degree felony as provided for in s.817.	false information 155, F.S.	
	Gus B. Spanos		
	Typed or printed name of signee		



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

DELAWARE, DO HEREBY CERTIFY "CLEAR SIGHT PARTNERS HOLDINGS, 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 SIXTEENTH DAY OF OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLEAR SIGHT

PARTNERS HOLDINGS, LLC" WAS FORMED ON THE FIRST DAY OF SEPTEMBER,

A.D. 2020.

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

Authentication: 203879569

Date: 10-16-20