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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

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

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Foreign Limited Liability Company TL INVESTOR II, LLC

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Corporate Filing Menu



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For fi	urther inf	formation con	cerning this	matter, plea	ise call:						
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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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: TL Investor II, 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.") Unavailable at this time Delaware (FEI number, if applicable (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business to Florida, if prior to registration.) (See sections 605.0904 & 605.0903, F.S. to determine penalty liability) 1600 E. 8th Avenue Ste A210-A 1600 E. 8th Avenue Ste A210-A (Mailing Address) (Street Address of Principal Office) Tampa, Plorida 33605 Tampa, Florida 33605 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Robert S. Forsythe Name: 1600 E. 8th Avenue Ste A210-A Office Address: Tampa , Florida 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.

/s/ Robert S. Forsythe
(2) enjete red a remain a signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

Title or Capacity: Manager	Name and Address; Ronald G. Wanek	Title or Capacity: Manager	Name and Address: Todd R. Wanek
☐Member ☐Authorized	Address: 1600 E. 8th Avenue Ste A210-A Tampa, Florida 33605	☐ Member ☐ Authorized	Address: 1600 E. 8th Avenue Ste A210-A Tampa, Florida 33605
Person		Person	
Other	Other	Other	Other
■Manager Member Authorized Person Other	Name: Kati S. Wanek-Forsythe 1600 E. 8th Avenue Ste A210-A Tampa, Florida 33605	Manager Member Authorized Person Other	さい ー
□Manager □Member □Authorized	Name:	☐ Manager ☐ Member ☐ Authorized	Name:
Person Other	Other	Person Other	Other

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.

/s/ Todd R. Wanek	
 Signature of an authorized person	
Todd R. Wanek	
 Typed or printed name of signer	

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "TL INVESTOR II, 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 THIRD DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TL INVESTOR II,

LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF AUGUST, A.D. 2020.

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

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SR# 20208196013
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203999162

Date: 11-03-20