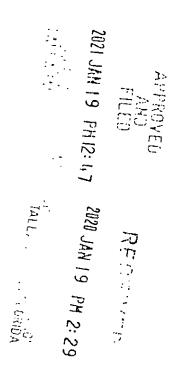
# M21000000678

(Requ	estor's Name	)		
(Addre	255)			
(Addre	ess)			
(City/S	State/Zip/Phor	ne #)		
☐ PICK-UP	☐ WAIT	MAIL		
(Busin	ess Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	es of Status		
Special Instructions to Fili	ng Officer			

Office Use Only



800358272888



\* Himpiles



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 616588, 8113042

AUTHORIZATION : MAN

COST LIMIT : \$ 125.00

ORDER DATE: January 15, 2021

ORDER TIME : 10:53 AM

ORDER NO. : 616588-015

CUSTOMER NO: 8113042

\_\_\_\_\_

## FOREIGN FILINGS

NAME: CRESCENT CLUB PARTNER LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

# COVER LETTER

. '. :

TO: Registration Section

Div	ision of Corporation	S				
SUBJECT:	Crescent Club Partne	er LLC				
	Name of Limited Liability Company					
				ation to Transact Business in Florida, ited liability company to transact busi		
Please return	n all correspondence c	oncerning this matter to the follow	wing:			
	Hanna Jamar					
		Name of Person				
	Lincoln Avenue Capital					
	Firm/Company					
	680 5th Avenue. 17th Floor					
	Address					
	New York, NY 10019					
	City/State and Zip Code					
	jinxi@lincolnave	cap.com / hanna@lincolnaveca	•			
		E-mail address: (to be used for t	uture annua	report notification)	-	
For further in	nformation concerning	this matter, please call:				
Hanna Jamar		at (	646	585-5525		
	Name of	Contact Person	Area Code	Daytime Telephone Number	-	
MAILING ADDRESS: Division of Corporations Registration Section				STREET ADDRESS: Division of Corporations Registration Section		
	). Box 6327 lahassee, FL 32314			Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	losed is a check for the	e following amount: e to: FLORIDA DEPARTMEN	ET OF STA	TE		
	\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00		Fee. Certificate	

### 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 TIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate	name adopted for the purpose of transacting business in F	londa. The alternat	name must include "Limited Liability	ty Company," "L.L.C," or "LLC
Delaware		3		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	J	(FEI mumber,	if applicable)
Upon Filing				
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to detern	o registration ) mine penalty liabili	y)	<del>_</del> _
401 Wilshire Blvd, S			l Wilshire Blvd, Suite 10	
(Street Address of Principal Office)		o	(Mailing Address	5)
Santa Monica, CA 9	0401	Sai	nta Monica, CA 90401	
		Cui	ita Moriica, CA 3040 i	
Name and street addre	ss of Florida registered agent: (P.O. Bo			202
Name and street addre	ss of Florida registered agent: (P.O. Bo			2021 JAN
Name and street addre	ss of Florida registered agent: (P.O. Bo Corporation Service Company			2021 JAN 19
				. 9
Name:	Corporation Service Company			2021 JAN 19 PH 12: 47

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.

Corporation Service Company	
By: Shank & Police 1	
(Registered agent's signature)	

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: Name: Jeremy S. Bronfman ■ Manager ☐ Manager Name: Address: 401 Wilshire Blvd, Suite 1070, Member Address: Santa Monica, CA 90401 ☐ Authorized Authorized Person Person Other Other Other Other Manager Name: \_\_\_\_\_ Manager Name: Member Address: \_\_\_\_\_ Member | Address: Authorized Authorized Person Person Other \_\_\_ Other\_\_\_\_ Other Other ☐Manager Manager Name: Name: \_\_\_\_\_\_ Member Address: Member Address: ☐Authorized Authorized Person Person Other Other Other\_\_\_\_ Other\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. /s/ Hanna Jamar Signature of an authorized person Hanna Jamar

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "CRESCENT CLUB PARTNER 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 FIFTEENTH DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CRESCENT CLUB PARTNER LLC" WAS FORMED ON THE FIFTEENTH DAY OF JANUARY, A.D. 2021.

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

Authentication: 202302196

Date: 01-15-21

4749980 8300 SR# 20210134283