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Florida Department of State

Division of Corporations

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Foreign Limited Liability Company
IronTee Capital LLC

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May 5, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LIPPES, MATHIAS, WEXLER, FRIEDMAN LLP

SUBJECT: IRONTEE CAPITAL LLC
REF: H21000149276

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor
Registration Section

FAX Aud. #: H21000149276
Letter Number: 721A00009316

P.O BOX 6327 - Tallahassee, Florida 32314

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IRONTEE CAPITAL LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above-referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Christopher A. Walker
Name of Person

LIPPES MATHIAS WEXLER FRIEDMAN LLP
Firm/Company

10151 Deerwood Park Boulevard, Building 300, Suite 300
Address

Jacksonville, Florida 32256
City/State and Zip Code

cwalker@lippes.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher A. Walker at (904) 660-0020
Name of Contact Person — Area Code — Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:
Please make check payable to: FLORIDA DEPARTMENT OF STATE

☐ $125.00 Filing Fee ☐ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy

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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:

1. IRONTEE CAPITAL 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.")

2. Delaware
(Jurisdiction under the laws of which foreign limited liability company is organized)

3. 86-1646252
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. re: determination penalty liability.)

5. 822 A1A Highway North, Ponte Vedra Beach
(Street Address of Principal Office)

Florida 32082

6. 822 A1A Highway North, Ponte Vedra Beach
(Mailing Address)

Florida 32082

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7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Christopher A. Walker

Office Address: 10151 Deerwood Park Boulevard , Building 300, Suite 300

Jacksonville (City), Florida 32256 (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.

_____
(Registered agent's signature)

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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 ☐Member ☒Authorized Person ☐Other	Name: Lee Kaplan Address: 822 N. Highway A1A Building C, Suite 208 Ponte Vedra, FL 32082	☐Manager ☐Member ☐Authorized Person ☐Other	Name: Address:
☐Manager ☐Member ☐Authorized Person ☐Other	Name: Address:	☐Manager ☐Member ☐Authorized Person ☐Other	Name: Address:
☐Manager ☐Member ☐Authorized Person ☐Other	Name: Address:	☐Manager ☐Member ☐Authorized Person ☐Other	Name: Address:

Important Notice: 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.

DocuSigned by:
Lee Kaplan
CC04D9147194447...
Signature of a member or authorized person

Lee Kaplan
Typed or printed name of signee

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IRONTEE CAPITAL 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 THIRTIETH DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IRONTEE CAPITAL LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JANUARY, A.D. 2021.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jeffrey W. Bullock, Secretary of State

4811686 8300
SR# 20211111429

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Date: 03-30-21

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