M2100005939

(Requestor's Name)				
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MAY 17 2021 M. SOLOMON

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

5/11/2021

NAME: ALAMO VINELAND BUYER, LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section

	Name of Limited Liability Company				
		Company for Authorization to Transact Business in Fl referenced foreign limited liability company to transact			
	all correspondence concerning this matter t				
	Missy Reynolds				
	Name of Person		<u>.</u>		
Firm/Company					
	3908 Avenue B		377	<u> </u>	
Address			B21 7		
	Austin, TX 78751		HASA HASA	2821 MAY 1.1	
	City/State and Zip Code				
	missy.reynolds@drafthouse.com		0F STAI	4 H Ю: 39	
	E-mail address: (to be	e used for future annual report notification)		ယ္	
er in	formation concerning this matter, please ca	n:	7.	Ψ	
Miss	sy Reynolds	512 861-7095 at()			
	Name of Contact Person	at () Area Code Daytime Telephone Nun	nber		
Reg Divi P.O	ling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

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

IN COMPLANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TEMITED LABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	r, LLC Limited Liability Company; must include "Limit	ed Liabilit	y Company," "L.I.C.," o	r "I.I.C.")		
If name unavailable, enter alternate a	name adopted for the purpose of transacting business in I	lorida. The	alternate name must include	"Limited Liability Company."	'~L.L C.^ o	r "LLC.")
Delaware	hich foreign limited liability company as organized)	3.		(FEI number, if applicable)		
ı						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to detern	o registratio nine penalty	n.) Hability)			
3908 Avenue B		,	3908 Avenue B			
Street Address of Principal Office)		6,	(Mailing Address)		زی سز در در	.ZØ21
Austin, TX 78751			Austin, TX 78751			
					1388 A	
7. Name and street address	ss of Florida registered agent: (P.O. Bo:	NOT	acceptable)		OF STATE	AH 10: 39
Name:	Florida Filing & Search Services Inc.				•	
Office Address:	155 Office Plaza Dr., Suite A					
	Tallahassee		Florida	301		
	(City)		(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)

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: Shelli Taylor Name: Matt Vonderahe □Manager □ Manager 3908 Avenue B Address: _ 3908 Avenue B □Member □Member Austin, TX 78751 Austin, TX 78751 □ Authorized □ Authorized Person Person ≅Other_CEO ■Other_CFO □Other____ □Other____ □Manager Name: □Manager □Member Address: □Member Address: □ Authorized □Authorized Person Person □Other □Other____ □Other_ □Other <u></u> □ □ Name: □Manager □Manager 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.

Sul EPPo	
Signatur	e of an authorized person
Shelli Taylor	
Typed c	r printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ALAMO VINELAND BUYER, 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 ELEVENTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALAMO VINELAND BUYER, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2021.

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

e at corp delaware pov/aut

Authentication: 203174491

Date: 05-11-21

5878810 8300 SR# 20211703380



FLORIDA DEPARTMENT OF STATE Division of Corporations

PECENTED 2021 MAY 14 PM 1:59 TACKAHASSEE, FLORIL

May 12, 2021

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: ALAMO VINELAND BUYER, LLC

Ref. Number: W21000065098

We have received your document for ALAMO VINELAND BUYER, LLC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a Foreign Corporation, but your entity is a Foreign LLC. Please complete and return the enclosed blank form(s).

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

Prease keep original file dotte

Thank you!

Mel Solomon Senior Section Administrator

Letter Number: 721A00009931