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(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE :

945,346 / 7611082

AUTHORIZATION

COST LIMIT :

ORDER DATE: August 5, 2021

ORDER TIME : 11:09 AM

ORDER NO. : 945346-005

CUSTOMER NO: 7611082

FOREIGN FILINGS

NAME: 111 HG OUTPARCEL 1 LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY

__ PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

COVER LETTER

	Registration Section Division of Corporations						
SUBJEC	III HG Outparcel I LLC						
		e of Limited Liability Company	-				
		Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.					
Please re	turn all correspondence concerning this matter t	o the following:					
	Bradford D West						
		Name of Person	-				
	West PLC						
	Firm/Company						
	174 W Comstock Ave, Suite 105						
		-					
	Winter Park, Fl. 32789 City/State and Zip Code						
	Brad.West@WestPLC.com	•	2821 AUS				
	E-mail address: (to be	e used for future annual report notification)	_ ?, - 3,	, e			
For furth	er information concerning this matter, please ca	11:	P	17			
	Bradford D West	407 5795459 .	1 1: 03	31. 3			
	Name of Contact Person	Area Code Daytime Telephone Number	03				
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 DEP \$125.00 Filing Fee Certificate of	e & 🗀 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee,					

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

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY.
COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA.

(Name of Foreign	Limited Liability Company; must include "Limited	Liability Co	mpany," "L L.C.," or "LLC ")	
name unavailable, enter alternate n	name adopted for the purpose of transacting business in Floring	orida. The alter	nate name must include "Limited Liabilit	y Company," "L.L.C." or "LLC
Delaware			7-2001218	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	J	(FEI number, if	applicable)
·	(Date first transacted business in Florida, if note to	registration 1		_
	(Date first transacted business in Fforda, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	ne penalty liabi	lity)	
174 W Comstock Ave.		6	4 W Comstock Ave., Suite I	11
treet Address of Principal Office)		0	(Mailing Address)	
Winter Park, FL 32789		Winter Park, FL 32789		
Now and street address	<u>s</u> of Florida registered agent: (P.O. Box	NOT again	ontobio)	
Name and street addres	s of Piorida registered agent: (P.O. Box	NOT acco	ершне	2021
Name:	Corporation Service Company			AUG.
Office Address:	1201 Hays St			
	Tallahassee		32301 . Florida	- · · · · · · · · · · · · · · · · · · ·
	(City)		(Zip code)	$\ddot{\omega}$

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.

(1)

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 Capacit	<u>v:</u>	Name and Address:		
□Manager	Name:	□Manager	Name:			
■Member	Address: 174 W Comstock Ave., #111	□Member	Address:			
□Authorized	Winter Park, FL 32789	□Authorized				
Person		Person				
□Other	Other	□Other		□Other		
□Manager	Name:	□Manager	Name:			
□Member	Address:	□Member	Address:			
□Authorized		□Authorized				
Person		Person				
□Other	Other	□Other		□Other	28	
				· · · · · · · · · · · · · · · · · · ·		
□Manager	Name:	□Manager	Name:	<u></u>	<u> </u>	
□Member	Address:	□Member	Address:		O (4)	
□Authorized		□Authorized				
Person		Person	•		<u> </u>	
□Other	Other	□Other		□Other		

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:

John Buldon

DectariseGeneral Signature of an authorized person



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

DELAWARE, DO HEREBY CERTIFY "111 HG OUTPARCEL 1 LLC" IS DULY FORMED

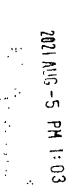
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE FIFTH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "111 HG OUTPARCEL 1 LLC" WAS FORMED ON THE THIRTIETH DAY OF JULY, A.D. 2021.

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





Authentication: 203849920

Date: 08-05-21