M2100011280

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August 9, 2021

SAMUEL P LATONE 6515 COLLINS AVE #1702 MIAMI BEACH, FL 33141

SUBJECT: PANTHEON PARTNERS LIMITED LIABILITY COMPANY

Ref. Number: W21000110461

We have received your document for PANTHEON PARTNERS LIMITED LIABILITY COMPANY and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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

Suzanne Hawkes Regulatory II

www.sunbiz.org

Letter Number: 521A00018832

COVER LETTER

Registration Section
Division of Corporations

TO:

Name	of Limited Liability Company			
he enclosed "Application by Foreign Limited Liability Castence, and check are submitted to register the above r	Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Flor			
lease return all correspondence concerning this matter to	the following:			
Samuel P Latone				
	Name of Person			
Pantheon Partners LLC				
	Firm/Company			
6515 Collins Ave, #1702				
	Address			
Miami Beach, FL 33141				
C	ity/State and Zip Code			
sam.latone@tscg.com 1/ E-mail address: (to be	used for future annual report notification)			
or further information concerning this matter, please cal				
Samuel P Latone	at (404) 219-2989			
Name of Contact Person	at (404) 219-2989 Area Code Daytime Telephone Number			
Mailing Address:	Street Address: Registration Section			
Registration Section Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			
	Tallahassee, FL 32303			
Enclosed is a check for the following amount:				
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEP \$\Boxed{1}\$\$ \$125.00 Filing Fee \$\Boxed{\Boxes}\$\$\$ \$\$130.00 Filing Fee	PARTMENT OF STATE			

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

IN COMPLANCE BITH NECTION @5.000, FLORIDA STATUTES, THE FOLLOWING INSUBMITTED TO REGISTER A FOREIGN TIMITED HABILITY COMPANY/TOTIGANACTBENINENS IN THE STATE OF FLORIDA:

1. Pantheon Partners, LLC

	ine adopted for the purpose of fransacting business in H	urida 10c.ii	nernale name must menuse 1, inite i	славину с виф	willy, L.	
Georgia		3.	47-0850909			
(Jurisdiction under the law of wh	ich loteign lausted liability company is organizedl	-	(11) no	nber, il applica	bler	
7-27-2021						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration ne penalty li	repthty)			
92 West Paces F	erry, NW	6	6515 Collins Ave			
treet Address of Principal Office)			(Mailing Address)	(1)	20	
Unit 6019			#1702		2021 AUG	
Atlanta, GA 30305	j	_	Miami Beach, FL 3	- हो। 3314 <u>1</u> ;:	15 St	eurse:
Name and street address	of Florida registered agent: (P.O. Box	NOT ac	cceptable)	STATE STATE	AH II: 13	
Name:	Samuel P Latone					
Office Address:	6515 Collins Ave, #1702					
	Miami Beach		, Florida 3314	1		
	(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.

Samuel P Latone	<u>-</u>
(Registered agent's aguiture)	

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: Name and Address: Title or Capacity: Name: _Elizabeth K Latone Name: Samuel P Latone ∐Manager 6515 Collins Ave, #1702 Address: 6515 Collins Ave, #1702 Address: **X**lMember XMember Miami Beach, FL 33141 Miami Beach, FL 33141 □ Authorized □ Authorized Person Person □Other_____ ☐Other_____ □Other_____ □Other____ Name: Name: □Manager Address: Address: ☐Member □ Member □ Authorized □ Authorized Person Person □Other_____ □Other_____ □Other____ □Other Name: Name: □Manager □ Manager □ Member ☐ Member Address: 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 submutted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S. Samuel P Latone Signature of an unthorized person Samuel P Latone

Typed or printed name of signer

Control Number: 0205131

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PANTHEON PARTNERS, LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number : 21777862 Date Inc/Auth/Filed: 01/25/2002 Jurisdiction : Georgia Print Date : 08/13/2021

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State