

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407)843-4600
Fax Number : (786)901-8020
Attn: Tami D. Passley

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
Foundry Commercial Developer, LLC**

Certificate of Status	0
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Estimated Charge	\$155.00

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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. Foundry Commercial Developer, 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 86-3892009
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Upon qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 420 S. Orange Avenue
(Street Address of Principal Office)
Suite 400
Orlando, Florida 32801

6. 420 S. Orange Avenue
(Mailing Address)
Suite 400
Orlando, Florida 32801

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation 33324
(City) , Florida (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.

Lauren Kreatz, Vice President /s/ Lauren Kreatz

(Registered agent's signature)

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21 SEP 20 PM 3:14
CLERK OF THE COURT
STATE OF FLORIDA

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:**
☒ Manager Name: Foundry Commercial, LLC
☒ Member Address: 420 S. Orange Avenue
☐ Authorized Suite 400
Person Orlando, Florida 32801
☐ Other ☐ Other

Title or Capacity: **Name and Address:**
☐ Manager Name: Prysc Elam
☐ Member Address: 420 S. Orange Avenue
☐ Authorized Suite 400
Person Orlando, Florida 32801
☒ Other President ☐ Other

☐ Manager Name: Paul B. Ellis
☐ Member Address: 420 S. Orange Avenue
☐ Authorized Suite 400
Person Orlando, Florida 32801
☒ Other Vice President ☐ Other

☐ Manager Name: Scott Renaud
☐ Member Address: 420 S. Orange Avenue
☐ Authorized Suite 400
Person Orlando, Florida 32801
☒ Other Vice President ☐ Other

☐ Manager Name: Kevin R. Maddron
☐ Member Address: 420 S. Orange Avenue
☐ Authorized Suite 400
Person Orlando, Florida 32801
☒ Other Treasurer ☒ Other Secretary

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ 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.



Signature of an authorized person

Kevin R. Maddron

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FOUNDRY COMMERCIAL DEVELOPER, 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 TWENTIETH DAY OF SEPTEMBER, A.D. 2021.

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



5906465 8300

SR# 20213284737

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204195837

Date: 09-20-21



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From: Name: Passley, Tami
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Company:
Fax Number: 1-850-617-6381

Subject:
Foundry Commercial Developer, LLC

Comments:

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Thank you.