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(((H21000360666 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email	Address	i •	

Foreign Limited Liability Company Tandem FL MT LLC

Certificate of Status Certified Copy 1 Page Count 04 Estimated Charge \$155.00

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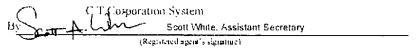
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605.000, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Tandem FL MT LLC.	Limited Liability Company; must include "Limited	Tightlige Commons " "T. L.C.	The STATE OF		_
V mms m v v v g n		a manny i vanpany. C.L. C	or Giv.		
(It name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	londa. The alternate name must in	clude "Limited Linbiti	ty Company," "L.E.C, "or "	Lt.(")
Delaware		3.			
Characterion under the law of w	hich foreign timited liability company (4 organized)	***	(FFI number, it	(applicable)	-
1					
4.	(Date first transacted business in Florida, if prior to (See sections 605-6004-£, 605-6005, F.S. to determ.	registration) ne penalty hability)			
267 Broadway, Brook	lyn, New York 11211		Brooklyn, New	York 11211	
(Streat Address of Principal Office)		(Mailing Additi	235)	(S2)	-
				27	A SAME AND
					177
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)		MII: 3	
				- FAE 31	
Name:	CT Corporation System			,	وارد: خلحت
	1200 South Pine Island Road				
Office Address:					
	Plantation	, Florida	33324		
	(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.



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>Y:</u>	Name and Address:
∟Manager	Tandem FL Operations Holdings Name: LLC	≟ Manager	Name:	
© Member	Address: 267 Broadway	□ Member	Address:	
□ Authorized	Brooklyn, New York 11211	☐ Authorized		***************************************
Person		Person		
Other	□Other	Other		Other
□ Manager	Name:	∐ Manager	Name:	
□Member	Address:	□Member		
T. Authorized		Authorized	 	··-
Person		Person		
_Other		=Other		Other
□ Manager	Name:	☐ Manager	Name:	
⊡Member	Address:	□ Member	Address:	
Authorized		T Authorized		
Person		Person		
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.

/s/ Daniel A. Gottesman			
Signature of an authorized person			
Daniel A. Gottesman, Authorized Representative			
Typed or printed name of signee			



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

DELAWARE, DO HEREBY CERTIFY "TANDEM FL MT 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 TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2021.

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

cat corp delaware gov/auth

Authentication: 204255206

Date: 09-27-21