M21000014430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

S. FRANKLIN

OCT 29 2021

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 174208 8293789

AUTHORIZATION :

COST LIMIT : $130.00

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ORDER DATE : October 28, 2021

ORDER TIME : 2:30 PM

ORDER NO. : 174208-005

CUSTOMER NO: 8293789

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FOREIGN FILINGS

NAME: MARKETS SPE SCHULMANN LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER: _____

**COVER LETTER**

**TO:** Registration Section
Division of Corporations

**SUBJECT:** MARKETS SPE SCHULMANN LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

FRANCES VALENZUELA, EA; MST
Name of Person

MARKETS SPE SCHULMANN LLC
Firm/Company

3255 NW 94TH AVE 8473
Address

CORAL SPRINGS, FL 33076
City/State and Zip Code

FRANCES@TSK.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCES VALENZUELA at ( 718 ) 490-6446
Name of Contact Person — Area Code — Daytime Telephone Number

**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 DEPARTMENT OF STATE**

☐ $125.00 Filing Fee ■ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy

10:5 PM 02 JUN 1682

**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. MARKETS SPE SCHULMANN 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. DELWARE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 87-3297172
(FEI number, if applicable)

4. 11/1/2021
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904(3)-(605.0905, F.S. to determine penalty liability)

5. 3255 NW 94TH AVE 8473
(Street address of Principal Office)
CORAL SPRINGS FL 33076

6.
(Mailing Address)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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**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.*

Corporation Service Company

By: Alexis Weibel, assistant vice president
(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: |
|---|---|---|---|
| ☐ Manager | Name: FRANCES VALENZUELA | ■ Manager | Name: DANIEL SCHULMANN |
| ☐ Member | Address: 3255 NW 94TH AVE 8473 | ☐ Member | Address: 7125 FRUITVILE ROAD |
| ■ Authorized | CORAL SPRINGS, FL 33076 | ☐ Authorized | #1515 |
| Person | | Person | SARASOTA, FL 34240 |
| ☐ Other | ☐ Other | ☐ Other | ☐ Other |
| ■ Manager | Name: RONNIE SCHULMANN II | ☐ Manager | Name: |
| ☐ Member | Address: 169 CHESTNUT RIDGE RD | ☐ Member | Address: |
| ☐ Authorized | SADDLE RIVER, NJ 07458 | ☐ Authorized | |
| Person | | Person | |
| ☐ Other | ☐ Other | ☐ Other | ☐ Other |
| ☐ Manager | Name: | ☐ 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. 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

FRANCES VALENZUELA, MSA, MST

Typed or printed name of signee

# Delaware

The First State



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MARKETS SPE SCHULMANN 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-EIGHTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MARKETS SPE SCHULMANN LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2021.

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

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2021 OCT 28 PM 5:31
[illegible]

Jeffrey W. Bullock, Secretary of State

6339030 8300

SR# 20213639294

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

Authentication: 204535127

Date: 10-28-21