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| Certified Copies        | _ Certificates    | s of Status                           |
| Special Instructions to | Filing Officer:   |                                       |
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APPROVED AND FILED

NOV 0 9 2021

K. Brumbley



October 26, 2021

#### **UPS OVERNIGHT DELIVERY**

Florida Department of State Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Florida 32303

Re: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida (PRSF, L.L.C.)

Dear Sir or Madam:

Enclosed for **PRSF**, L.L.C. are the following: check number 4702 in the amount of \$125.00 as payment of the filing fee; the completed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida; and a Certificate of Fact from the Commonwealth of Virginia's State Corporation Commission.

Please be sure to <u>include</u> the <u>punctuation</u> that appears <u>in the name</u> as shown above, on the application, and within the Certificate of Fact, as the punctuation is part of our legal name and needs to appear both on the authorization documents and on the "SunBiz" website.

Thank you for processing this request as soon as possible. If you have any questions, please contact me either by phone at (804) 320-7101, ext. 3012 or email at <a href="mailto:aharris@gscapts.com">aharris@gscapts.com</a>.

Sincerely.

Anita Harris

Corporate Paralegal

Enclosures

#### **COVER LETTER**

|  | PRSF, L.L.C.   |  |
|--|--|--|
| UBJEC  |  | Name of Limited Liability Company  |
|  |  |  |
| ne enclo<br>vistence   | sed "Application by Foreign Limited Liab<br>, and check are submitted to register the ab | oility Company for Authorization to Transact Business in Florida," Certificat<br>bove referenced foreign limited liability company to transact business in Flo |
|  | urn all correspondence concerning this ma  |  |
|  | Bonnie L. Wood   |  |
|  |  | Name of Person   |
|  | General Services Corporation   |  |
|  | <del></del>  | Firm/Company   |
|  | 2922 Hathaway Road, P O Box 8  | 984  |
|  |  | Address  |
|  | Richmond, VA 23225   |  |
|  |  | City/State and Zip Code  |
|  | licensing@gscapts.com  |  |
|  | E-mail address: (  | (to be used for future annual report notification)   |
| or furthe  | r information concerning this matter, pleas  | se call:   |
| 1  | Anita Harris   | 804 320-7101 ext 3012  |
| -  | Name of Contact Person   | at () Area Code Daytime Telephone Number   |
|  | Mailing Address:   | Street Address:  |
| Registration Section   |  | Registration Section   |
| Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |  | Division of Corporations   |
|  |  | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810   |
|  | allallassee, FL 32314  | Tallahassee, FL 32303  |
|  | Enclosed is a check for the following amou   |  |
|  | Please make check payable to: FLORIDA<br>■ \$125.00 Filing Fee                           |  |

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

IN COMPILANCE 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. PRSF, L.L.C. (Name of Foreign                                 | Limited Liability Company; must include "Limit   | ed Liability (                      | Company," "L.L.C.," or "LLC.")        |  |
|--|--|-------------------------------------|---------------------------------------|--|
| (If name unavailable, enter alternate a                          | name adopted for the purpose of transacting business in I  | lorida The al                       | ernate name must înclude "Limited Lia | bility Company," "L.E.C," or "LLC.")                         |
| Commonwealth of Virg   | inia hich foreign limited liability company is organized)  | 3                                   | 87-3249037                            | er, if applicable)   |
| N/A<br>4.  |  |                                     |                                       | ,  |
| 4.   | (Date first transacted business in Florida, if prior to<br>(See sections 605,0904 & 605,0905, F.S. to determ | o registration )<br>nine penalty li | ability)                              | <del></del>  |
| 2922 Hathaway Road<br>5.<br>(Street Address of Principal Office) | <u> </u>   | 6. <u> </u>                         | O Box 8984 (Mailing Address)          | <del></del>  |
| Richmond, VA 23225   | <del></del>  | F<br>-                              | Richmond, VA 23225                    |  |
| 7. Name and street address                                       | ss of Florida registered agent: (P.O. Bo   | x <u>NOT</u> ac                     | ceptable)                             | 2021 OCT   |
| Name:  | Corporation Service Company  |                                     |                                       | PIL<br>PIL<br>OCT 27<br>PILAGO<br>PILAGO<br>PILAGO<br>PILAGO |
| Office Address:  | 1201 Hays Street   |                                     |                                       | PH 12:   |
|  | Tallahassec  |                                     | 32301<br>, Florida                    | 7.119<br>1.119   |
|  | (City)   |                                     | (Zip code)                            | <del></del>  |

#### 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.

Solyman Washington Assistant Secretary
(Registered agont'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: DAVM Corporation      | □Manager           | Name: Bonnie L. Wood        |
| □Member            | Address: 2922 Hathaway Road | □Member            | Address: 2922 Hathaway Road |
| □Authorized        | Richmond, VA 23225          | Authorized         | Richmond, VA 23225          |
| Person             |                             | Person             |                             |
| □Other             | Other                       | □Other             | Other                       |
| □Manager           | Name:                       | □Manager           | Name:                       |
| □Member            | Address:                    | □Member            | Address:                    |
| □Authorized        |                             | □Authorized        |                             |
| Person             |                             | Person             |                             |
| □Other             | Other                       | Other              | Other                       |
| □Manager           | Name:                       | □Manager           | Name:                       |
| □Member            | Address:                    | □Member            | Address:                    |
| □Authorized        |                             | □Authorized        |                             |
| Person             |                             | Person             |                             |
| Other              | Other                       | Other              | Other_                      |

<u>Important Notice:</u> 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.

| Bonnie         | L. Wood                           |  |
|----------------|-----------------------------------|--|
|                | Signature of an authorized person |  |
| Bonnie L. Wood |                                   |  |
|                | Typed or printed name of signee   |  |

## Commonbowalth of Hirginia



### State Corporation Commission

#### CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That PRSF, L.L.C. is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on October 25, 2021; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

October 25, 2021

Bernard J. Logan, Clerk of the Commission