10/27/21, 2:24 PM

Division of Corporations

Toold Department of State Division of Corporations Electronic Filings Lover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000399884 3)))



H210003998843ABCB

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

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:______

180 Y 30 PM 4: 08

Foreign Limited Liability Company ASG Holding, LLC

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

""HONOR ORIGINAL DATE 10-27"

Electronic Filing Menu

Corporate Filing Menu

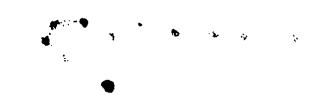
Help

S. ROBERTS

MIY 3 0 2021

Page: 4 of 6





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

IN COMPLIANCE WITH SECTION 605.0902, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

1. ASG Holding, LLC (Name of Foreign)	Timited Liability Company, must include "Limited	Liability	Company," T. L. C., or "LLC")	
ASG Holding (Florida)	LLC			
ASG Holding (Pfortia) LLC. (fi) name unavailable, enter alternate name ad, pled for the purpose of transacting business in Flor Delaware 2. Chrisdiction under the faw of which foreign finited hability company is organized.		stida. The alternate native must meltide "Limited 1 talobby Company," "1,1,0 " or "LLC" 87-2607628 3. (FEI number, if applicable)		
4	(Nate frict transacted business in Florida, if print to 15cc accurate 603 0904 & (US 0005, F.S., to determine	ne benalik Legistinisi) lisbithy)	-
400 Galleria Parkway 5. (Street Address of Principal Office)		6	400 Galleria Parkway	+
Suite 1760			Suite 1760	
Atlanta, GA 30339			Atlanta, GA 30339	
7. Name and <u>street addres</u>	s of Florida registered agent: {P.O. Box	<u>NOT</u> a	icceptable}	III HOV 30
Name.	C.T. Corporation System			w. To
Office Address:	1200 South Pine Island Road			
	Plantation		33324 , Florida	- r o
	(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.

Atephanie Woncy Stephanie Hencz, assistant secretary 11/30/2021

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 Canacity:	Name and Address:	Title or Capacity	:	Name and Address:
≅ Manager	Name: Jeremy Stone	□Manager	Name:	
ElMember	5200 Center Town Cir. Address:	□Member	Address:	
□Authorized	4th Flr.	□Authorized		
Person	Boca Raton, FL 33486	Person		
□Other	□ Other	□Other		□Other
₩ Manager	Matthew Joblove	∐Manager	Name:	
□Member	5200 Town Center Cir Address:	□Member	Address:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
□Authorized	4th Flr.	□Authorized	anaya nga shini Mharakh khibya 199 umaga da	and the second section of the section o
Person	Boca Raton, FL 33486	Person		
Other	☐Other	□Other	·	□Other
₩ Manager	Name: Patrick Dussinger	□Manager	Name:	
LiMember	Address:	□Member	Address:	- u.s
□ Authorized	Suite 1760	☐ Authorized		
Person	Atlanta, GA 30339	Person		
□ Other	O(her	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.

Patrick Du	Operature of an enthorized person
Patrick Dussinger	
	Typed or princed name of signes

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "ASG HOLDING, 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 OCTOBER, A.D. 2021.

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

Authentication: 204525257

Jeffrey W. Bullock, Socretary of State

Date: 10-27-21