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COVER LETTER

TO:

Registration Section

CT:	Name of Limited Liability Company	
	, ,	
closed "Application by Foreign Limited Liab ce, and check are submitted to register the ab	ility Company for Authorization to Transact Business in Florida," Certif pove referenced foreign limited liability company to transact business in	
eturn all correspondence concerning this ma	tter to the following:	
Carly Hanna		
	Name of Person	
Dossey & Jones, PLLC		
	Firm/Company	
25025 I45 North, Suite 575		
	Address	
The Woodlands, Texas 77380		
	City/State and Zip Code	
carly@dossey.com		
E-mail address: (to be used for future annual report notification)	
her information concerning this matter, pleas	se call:	
Carly Hanna	281 362-9909 at ()	
Name of Contact Person	Area Code Daytime Telephone Number	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amou	nt.	

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:

Sea Cliff, LLC					
(Name of Foreign	Limited Liability Company; must include "Limite	d Liabilit	y Company," "L.L.C.," or "LLO	C.")	
name unavailable, enter alternate r	name adopted for the purpose of transacting business in F	lorida. The	alternate name must include "Limi	ted Liability Company," "L.L.C," or "LL	
Texas		3			
(Jurisdiction under the law of which foreign limited liability company is organized)		٥.	3(FEI number, if applicable)		
December 1, 2021					
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration	n.) liability)		
25025 I45 North, Suite 575			25025 145 North, Suite	575	
treet Address of Principal Office)		о.	(Mailing Address)		
The Woodlands, Texas 77380			The Woodlands, Texas 77380		
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT	acceptable)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
				NOV NOV	
Name:	Brandon Jones			·· /> [-	
Name.				TT .	
Office Address:	3706 N. Roosevelt Boulevard, Suite 20	08			
	Key West		33040	- 発音 29 - 大	
	(City)		, Florida	<u>ω</u>	

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 Capacity: Name and Address: Name: ____ Robert A. Jensen Brandon D. Jones ■ Manager ■ Manager 25025 I45 North, Suite 575 Address: ___ 25025 I45 North, Suite 575 Address: □Member □Member The Woodlands, Texas 77380 The Woodlands, Texas 77380 ☐ Authorized □ Authorized Person Person Other____ □Other_____ □Other___ Other □ Manager Name: □ Manager Name: _____ □Member Address: _____ □Member Address: ☐ Authorized Authorized Person Person □Other___ □Other____ □Other_____ □Other___ Name: □Manager Name: _____ □Manager □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. Nonindexed 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. Bruk Ohm Signature of an authorized person Brandon D. Jones, Manager

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin. Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Sea Cliff, LLC (file number 802798323), a Domestic Limited Liability Company (LLC), was filed in this office on August 23, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 16, 2021.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 1094420120002