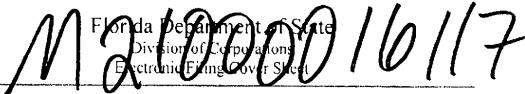
From: Lexus Wingo

12/1/21, 9:14 AM

Division of Corporations



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Fax Number : (954)208-0845

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## Foreign Limited Liability Company GARDEN CITY EP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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Help

From: Lexus Wingo

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. Garden City EP, LLC (Name of Foreign	Tamited Taibitity Company; must include "Tamite	d Liability Company " "L.L.C." or "LLC.")	
(II) name unavailable, enter alternate i	name adopted for the purpose of transacting business in Fl	lorida. The attenuate name must meltide "Limited Crabible	v Company," "L.L.C." or "LLC" )
Delaware		•	
Direction under the law of w	hich foreign limited liability company is organized)	3. If II number, if	applicable)
11/30/2021			
4,	(Date last transacted husiness in Florida it poor to (See sections 605 0904 & 005,0905 F.S. to determ	registration ) interpenalty hability)	_
199 Armour Drive, Su 5.		199 Armone Drive, Suite A  6. (Mailing Address)	
5. (Street Address of Principal Office)		(Mailing Address)	
Atlanta, GA 30324		Atlanta, GA 30324	
7. Name and street address  Name:  Office Address	C T Corporation System  1200 South Pine Island Road	: <u>NOT</u> acceptable)	PILED  2021 DEC -1 PM 3  SECRETARY OF STALL AHASSEE, FLO
¥	Plantation	33324 , Florida	3: 45 STATE LORIDA
	(Cny)	(Zip code)	
designated in this applica to comply with the provis and accept the obligation	otance: egistered agent and to accept service of partion, I hereby accept the appointment a ions of all statutes relative to the proper s of my position as registered agent.  By:  (Registered agent's Candice Pignataro, As	s registered agent and agree to act in the and complete performance of my dutic	his capacity. I further agree

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\$.	For initial indexing purposes	s, list names, title or	capacity and	addresses of the p	primary member	s/managers or p	ersons authorized	tc
ma	nage [up to six (6) total]							

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
⊒Малаgет	Name: Michael Arrieta	□ Manager	Name: Kyle Tama
□Member	Address:	□ Member	Address:
□Authorized	Suite A	□ Authorized	Sinte A
Person	Atlanta, GA 30324	P <b>e</b> rson	Atlanta, GA 30324
Other_President	Other	Sother Vice President	dentOther
DManager	Name:	∐Manager	Name:
□Member	Address:	_ Member	Address:
□Aurhorized		☐ Authorized	
Person		Person	
□Other	Other	□ Other	DOther
□Manager	Name:	∐ Manager	Name:
□Member	Address:	Member	Address:
□Authorized		□Authorized	
Person	<u> </u>	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 outh 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 fellow as provided for in s.817.155, F.S.

Egle Taura  Signature of an Entertrace for son						
Kyle Taura						

Page: 6 of 6



Page 1

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

DELAWARE, DO HEREBY CERTIFY "GARDEN CITY EP, 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 THIRTIETH DAY OF NOVEMBER, A.D. 2021.

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

e at corn delaware gov/aut

Authentication: 204820208

Date: 11-30-21