Maa000001043

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400378311594

12/27/21--01045--017 **180.00

2022 JAN -5 AM 9: 30 SECRETARY OF STATE

COVER LETTER

HD IPZW	EPC HOLDINGS 1011 LLC				
UBJECT	T:Name of Limited Liability Company				
he enclos xistence,	ted "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certifica referenced foreign limited liability company to transact business in Florida			
ease retu	rn all correspondence concerning this matter t	to the following:			
	John Troutman				
		Name of Person			
	EPC Holdings 1011 LLC				
		Firm/Company			
	3161 Michelson, Ste. 425				
		Address			
	Irvine, CA 92612				
		ity/State and Zip Code			
	jtroutman@richlandinvestments.com				
	E-mail address: (to be	e used for future annual report notification)			
or further	information concerning this matter, please cal	II:			
John Troutman		949 383-4131 at ()			
<u></u>	Name of Contact Person	at () 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 2415 N. Monroe Street, Suite 810			
Tallahassee, F1. 32314		Tallahassee, FL 32303			

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA.

name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	orida. The altern	ate name must include "Limited Liability	y Company," "L.L.C," or "LLC "	
WASHINGTON (Jurisdiction under the law of which foreign limited liability company is organized)		S7	-4034694		
		J	(FEI number, if i	applicable)	
				_	
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration) ine penalty liabil	ıty)		
400 N. Ashley Drive, Suite 1750			N. Ashley Drive, Suite 1750		
treet Address of Principal Office)			(Mailing Address)		
Tampa, F1, 33602			Tampa, FL 33602		
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acce	ptable)	1 _A s 2	
Name and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box Dawn M. Lemons	NOT acce	ptable)	2022 JAN SECRET	
			ptable)	2022 JAN -5 A SECRETARY OF FALLAHASSEE, J	
Name:	Dawn M. Lemons 400 N. Ashley Drive, Suite 1750		 33602	-5 AI RY OF SSEE, F	
Name:	Dawn M. Lemons 400 N. Ashley Drive, Suite 1750			-5 SEE	

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 Capacit	Name and Address:
■Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized	Irvine, CA 92612	□Authorized	
Person		Person	
[]Other	Other	□Other	□Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Nlanager	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

Town C. Toutman

Typed or printed rame of signee

The State of Washington

Secretary of State

1, STEVE R. HOBBS. Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

EPC HOLDINGS 1011 LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 12/10/2021.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

1 FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Hssued Date: 01/13/2022 UBI Number: 604 849 814



Oriven inder my hand and the Seal of the State of Washington at Olympia, the State Capital

the R Hohlie

Steve R. Hobbs, Necretary of Nace

Date Issaed, 01, 13, 2022