

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

M220000654603

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : MACFARLANE FERGUSON & MCMULLEN
Account Number : 076077001654
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2022 FEB 18 PM 4:35

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: FLARTAMPA@MACFARLANE.COM

Foreign Limited Liability Company
MU LANDCO LIQUIDATING COMPANY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

FLORIDA DEPARTMENT OF STATE
ELECTRONIC FILING

2022 FEB 18 AM 9:00

APPROVED
AND
FILED

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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:

1. MU LandCo Liquidating Company, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 88-0775228
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine priority liability)

5. 1414 W. Swann Ave., Suite 100 1414 W. Swann Ave., Suite 100
(Street Address of Principal Office) (Mailing Address)

Tampa, Florida 33606 Tampa, Florida 33606

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: James W. Goodwin, Esq.
Office Address: 201 N. Franklin Street, Suite 2000
Tampa, Florida 33602
(City) (Zip code)

2022 FEB 18 AM 9:00
FILED
APPROVED AND FILED

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.

(Registered agent's signature)

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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:**

Manager Name: W. Andrew Krusen, Jr.

Member Address: 1414 W. Swann Ave., Ste. 100

Authorized Tampa, Florida 33606

Person _____

Other _____ Other _____

Title or Capacity: **Name and Address:**

Manager Name: Andra C. Douglas

Member Address: 1414 W. Swann Ave., Ste. 100

Authorized Tampa, Florida 33606

Person _____

Other _____ Other _____

Manager Name: Douglas N. Jones

Member Address: 1414 W. Swann Ave., Ste. 100

Authorized Tampa, Florida 33606

Person _____

Other Secty./Treas. Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

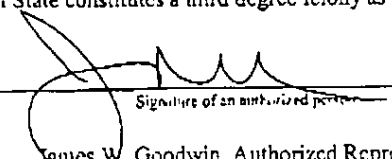
Person _____

Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be indexed 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
 James W. Goodwin, Authorized Representative

 Typed or printed name of signer

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(((H22000065460 3)))

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MU LANDCO LIQUIDATING COMPANY, 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 FIFTEENTH DAY OF FEBRUARY, A.D. 2022.



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

6283060 8300

SR# 20220520811

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202667865

Date: 02-15-22

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