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.

(((H22000104246 3)))



H220001042463ABCV

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Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

| Email | Address: | | _ |
|-------|----------|--|---|
|-------|----------|--|---|

Foreign Limited Liability Company THIRD LAKE VC III GP, LLC

**FILE FIRST, before H22000104248

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
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S. HAWKES

MAR _ = 2021

COVER LETTER

| TO: | Registration Section Division of Corporations | | | |
|--------------------------------|---|---|--|--|
| SUBJEC | Third Lake VC III GP, LLC | | | |
| SUBJEN | Name | of Limited Liability Company | | |
| The encl | losed "Application by Foreign Limited Liability Core, and check are submitted to register the above re | ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida. | | |
| Please re | eturn all correspondence concerning this matter to | the following: | | |
| | Christina T. Rodriguez. | | | |
| | | Name of Person | | |
| | c/o Haynes and Boone, LLP | | | |
| | | Firm/Company | | |
| 2323 Victory Avenue, Suite 700 | | | | |
| Address | | | | |
| Dallas, Texas 75219 | | | | |
| City/State and Zip Code | | | | |
| | rforsythe@thirdlake.com | | | |
| | E-mail address: (to be | used for future annual report notification) | | |
| For furt | her information concerning this matter, please call | e. | | |
| Robert Forsythe | | 813 497.8100 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 amount: Please make check payable to: FLORIDA DEP. \$125.00 Filing Fee Certificate o | : & ■ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate | | |

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:

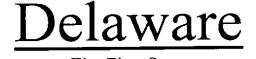
| same unavailable, enter alternate n | arne adopted for the purpose of transacting business in Flo | orida The a | dternate name must include "Limited Llabi | lity Company," "L.L.C," or " | LLC.") |
|--|---|----------------------------|---|------------------------------|--------|
| Delawarc | | _ | Unavailable at this time | | |
| (Jurisdiction under the law of which foreign limited liability company is organized) | | 3. | (FEI number, if applicable) | | - |
| | | | | | |
| | (Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, U.S. to determine | registration ne penalty |) hability) | | |
| 1600 E. 8th Avenue, Se | uite A132-A | £ | 1600 E. 8th Avenue, Suite Al | 32-A | |
| et Address of Principal Office) | | U. | (Mailing Address) | | - |
| Tampa, Florida 33605 | | | Tampa, Florida 33605 | F- 1 | _ |
| | | | | | |
| | | | | 12 | - |
| Name and street address Name: | is of Florida registered agent: (P.O. Box Robert Forsythe | <u>NOT</u> : | ecceptable) | 1 PH 12: 16 | () |
| Office Address: | 1600 E. 8th Avenue, Suite A132-A | | | 171 U | |
| | Татра | | 33605 , Florida | | |
| | | | (Zip code) | | |

| 8. | For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to |
|----|---|
| ma | mage {up to six (6) total}: |

| Name and Address: Robert Forsythe | Title or Capacity: | Name and Address Name: Kenneth P. Jones |
|------------------------------------|---|--|
| Name: | ■Manager | |
| Address: | □Member | Address: 1600 E. 8th Avenue |
| Suite A132-A | □Authorized | Suite A132-A |
| Tampa, Florida 33605 | Person | Tampa, Florida 33605 |
| Other | Other | Other |
| Name: | ∏Manager | Name: |
| Address: | □Member | Address: |
| | □Authorized | |
| | Person | |
| Other | □Other | |
| Name: | []Manager | Name: |
| Address: | □Member | Address: |
| | □Authorized | |
| | Person | |
| □Other | □Other | Other |
| | Name: Robert Forsythe Address: 1600 E. 8th Avenue Suite A132-A Tampa, Florida 33605 Other | Name: Robert Forsythe |

- 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.

| /s/ Robert Forsythe | |
|-------------------------------------|--------------|
| Signature of an authorized person | H22000104246 |
| Robert Forsythe | |
| Typed or printed name of signee | |



Page 1

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

DELAWARE, DO HEREBY CERTIFY "THIRD LAKE VC III GP, 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 EIGHTEENTH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THIRD LAKE VC III GP, LLC" WAS FORMED ON THE SIXTEENTH DAY OF MARCH, A.D. 2022.

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

e at corp.delaware.gov/authver.

Authentication: 202948915

Date: 03-18-22

6679385 8300

SR# 20221061102