(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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T. LEMIEUX MAR 2 4 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 566827 AUTHORIZATION : COST LIMIT : ORDER DATE: March 22, 2022 ORDER TIME : 8:40 AM ORDER NO. : 566827-005 CUSTOMER NO: 8093252 FOREIGN FILINGS NAME: TETON RIDGE, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

EXAMINER: _____

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

TO:

Division of Corporations		
Teton Ridge, LLC BJECT:		
	ne of Limited Liability Company	
	Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Florida.	
ase return all correspondence concerning this matter t	to the following:	
Kyle Skala		
	Name of Person	
	Firm/Company	
227 W Monroe St. STE 5000		
	Address	
Chicago, IL 60606		
C	City/State and Zip Code	
legal@franklinmonroe.com		
E-mail address: (to be	e used for future annual report notification)	
r further information concerning this matter, please ca	dt:	
Kyle Skala	312 977-4330	
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	
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 □ \$130.00 Filing Fee Certificate of	ee & 📋 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate	

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

IN COMPILANCE WITH SECTION 605.0002. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate n	name adopted for the purpose of transacting business in Flori	ida. The alternate name must include "Limited Liabili	ty Company," "L.1. C," or "L1.C		
Delaware		87-2237201			
(Jurisdiction under the law of which foreign limited hability company is organized)		3. (FEI number, if applicable)			
	Date first transacted business in Florida, if prior to reg (See sections 605 0904 & 605,0905, F.S. to determine	penalty liability)	_		
1899 N FM 52		1899 N FM 52			
eet Address of Principal Office)		6. (Mailing Address)			
Weatherford, TX 76088		Weatherford, TX 76088			
					
Name and street addres	ss of Florida registered agent: (P.O. Box 3) Corporation Service Company	<u>NOT</u> acceptable)	Ø 7A. 20.		
Name:			2022 HAR SECHEL ALLAHA		
Office Address:	1201 Hays Street		AGN ASSI		
	Tallahassee	32301 , Florida			
	(City)	(Zip code)	AM IO: 4 OF STAT OF LORIE		
	• • • •				

Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address:
□Manager	Name: Teton Ridge Management, LLC	□Manager	Name:	
■Member	Address: 1899 N FM 52	□Member	Address:	
□Authorized	Weatherford, TX 76088	□Authorized		
Person		Person		
Other	Other	Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other		Other
indexed individuals9. Attached is a cert	ise an attachment to report more than six (6). I may be added to the index when filing your F ificate of existence, no more than 90 days old the law of which it is organized. (If the certificate be submitted)	lorida Department of State, duly authenticated by the	Annual Report official having	t form. custody of records in the
	s executed in accordance with section 605.020 ment to the Department of State constitutes a t			
	Polanti	Tolonia		
	Signature	of an authorized person		-
	Robert Fedo Typed or	nis r printed name of signee		-

Page 1



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

DELAWARE, DO HEREBY CERTIFY "TETON RIDGE, 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 TWENTY-SECOND DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TETON RIDGE,
LLC" WAS FORMED ON THE SECOND DAY OF JULY, A.D. 2021.

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

at core delayers source

Authentication: 202977029

Date: 03-22-22