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(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Bu	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to	Filing Officer:			

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FILED 2022 MAY - 6 PH 4: 11

MAY 0 9 2022 K. Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 651035 7965870

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE: April 29, 2022

ORDER TIME : 1:09 PM

ORDER NO. : 651035-010

CUSTOMER NO: 7965870

FOREIGN FILINGS

NAME: CORAL SPRINGS HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

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

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

(Name of Fore	gs, LLC				_
	eign Limited Liability Company; must include "Lim	ited Liability Company," "L.L.C.," o	r "LLC.")		
(If name unavailable, enter al Liability Company," "L.L.C,"	Iternate name adopted for the purpose of transacting " or "LLC.")	business in Florida. The alternate na	me must inclu	de "Li	_ nited
2 Delaware	3				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	2)		-
4					
	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to de	prior to registration.) etermine penalty liability)	_		
5. 2850 Tigertail Avenu	ue, Suite 701		_		
Miami, Florida 33133	3				
	(Street Address of Principal Office)			
6. 2850 Tigertail Avenue	e, Suite 701		_ : .	202	
Miami, Florida 33133	3			2022 MAY -6	5
	(Mailing Address)			7 -	<u> मार्</u> च
7. Name and street addres	ss of Florida registered agent: (P.O. Box NOT	_acceptable)			后盖
Name:	Timothy Sanders			PH	FILED AND AVOYEN
Office Address:	2850 Tigertail Avenue, Suite 701		(<u>-</u> :	_
	Miami	, Florida <u>33133</u>	<u> </u>	_	
	(City)	(Zip code)	_		
designated in this applicate complywith the provision	gistered agent and to accept service of process tion, I hereby accept the appointment as regist ons of all statutes relative to the proper and co my position as registered agent.	tered agent and agree to act in th	uis capacity.	I furt	her agree
	Requisitered agent s sig	nature)	_		
	ncity and address of the person(s) who has/have		_		
8. The name, title or capa	acity and address of the person(s) who has/have				
8. The name, title or capa Arnaud Karsenti, Manaç	ncity and address of the person(s) who has/have				
8. The name, title or capa Arnaud Karsenti, Manag 2850 Tigertail Avenue, s	ncity and address of the person(s) who has/have				
8. The name, title or capa Arnaud Karsenti, Manag 2850 Tigertail Avenue, S Miami, Florida 33133	of existence, no more than 90 days old, duly at of which it is organized. (If the certificate is in a	authority to manage is/are: uthenticated by the official having a foreign language, a translation of			

Typed or printed name of signee

Arnaud Karsenti

Page 1



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

DELAWARE, DO HEREBY CERTIFY "CORAL SPRINGS HOLDINGS, 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 SIXTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CORAL SPRINGS HOLDINGS, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF APRIL, A.D. 2022.

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

Authentication: 203364878

Date: 05-06-22