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#### **CT CORP**

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	05/09/2022	a: DW
		Acc#I20160000072	4: ( ) = W
Name:	STOR C	CREFL FERDON, LLC	
Document #:			
Order #:	1431609	94 - 6	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
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#### COVER LETTER

		COVERLETTER					
	egistration Section vision of Corporations						
CUDIFCT	STOR CREFL FERDON, LLC						
SUBJECT:	Nanio	Name of Limited Liability Company					
The enclose Existence,	ed "Application by Foreign Limited Liability (and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.					
Please retur	m all correspondence concerning this matter to	o the following:					
	Melissa Childers						
		Name of Person					
	Maynard, Cooper & Gale, P.C.						
		Firm/Company					
	1901 Sixth Avenue North						
		Address					
	Birmingham, AL 35203						
	C	ity/State and Zip Code					
	mchilders@maynardcooper.com						
	E-mail address: (to be	used for future annual report notification)					
For further	information concerning this matter, please ca	II:					
M	delissa Childers	205 488-3612 at ()					
_	Name of Contact Person	Area Code Daytime Telephone Number					
R D P.	lailing Address: cgistration Section division of Corporations O. Box 6327 allahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

Enclosed is a check for the following amount:
Please make check payable to: FLORIDA DEPARTMENT OF STATE

### 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:

	Limited Liability Company; must include "Limited				
name unavailable, enter alternate t	ame adopted for the purpose of transacting business in Flor	nda. The alternate name must	include "Limited Liabili	ity Company," "L.L.C." or "l	LIC
Delaware		88-195	19954		
	hich foreign limited liability company is organized)	3 <del>_</del>	(FEI number. )	(applicable)	-
		akirdinā š		_	
	(Date first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determin	e penanty nationally			
2821 2nd Avenue Sou	:h	2821 2nd Ave	enue South		
treet Address of Principal Office)		6. (Mailing Add	dress1		
Suite M		Suite M			-
Birmingham, AL 3523	33	Birmingham,	AL 35233		
. Name and street addre	ss of Florida registered agent: (P.O. Box  CT Corporation System	NOT acceptable)		6- AWA 2207	FIL
				PM 2:	ED
Name Office Address:	1200 South Pine Island Road				
	1200 South Pine Island Road Plantation	, Floric	33324 da(Zin code)	03 :-	
Name				· · · · · · ·	

(it pistered agent's signature)

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 Capacity:	Name and Address:
□Manager	Name: HL STOR CREFL FERDON PI LLC	Manager	Name: A. Key Foster, III
<b>≅</b> Member	Address: 2921 2nd Avenue South	□Member	Address: 2821 2nd Avenue South
□Authorized	Suite M	<b>Authorized</b>	Suite M
Person	Birmingham, AL 35233	Person	Birmingham, AL 35233
□ 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

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

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# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "STOR CREFL FERDON, 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 NINTH DAY OF MAY, A.D. 2022.

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



Jeffrey W. Bullock, Secretary of State