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S. FRANKLIN MAY 1 6 2022

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. :	I2000000195	
REFERENCE :	675263 5011226	
AUTHORIZATION :		
COST LIMIT :	125 00 m.	
	- [
ORDER DATE : May 13, 2022		
ORDER TIME : 2:29 PM		
ORDER NO. : 675263-005		
CUSTOMER NO: 5011226		2022 Kirj
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FOREIGN FILE	<u>INGS</u>	5 PH
	, •	H 2:
NAME: POWERS PRIVATE	EQUITY LLC	<u> </u>
XXXX QUALIFICATION (TYPE: <u>LL</u>)		
PLEASE RETURN THE FOLLOWING AS PR	ROOF OF FILING:	
CERTIFIED COPY		
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STAND	OTNG	
CDRTITIONID OF GOOD STANK	×1110	
CONTACT DEDCOM. Bullians Daless	EV#	
CONTACT PERSON: Eyliena Baker	- EVI#	

EXAMINER:

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Delaware	which foreign limited liability company is organized)	3.	45-5191613 (FEI number, 11 appl	licable)
pon qualificatio	n			
<u> </u>	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to deterr	nne penalty pregistration) iability)	
320 Windsor B	lvd.	6	3320 Windsor Blvd.	707
Address of Principal Office)		0.	3320 Windsor Blvd. (Mailing Address)	-
/ero Beach, FL	32963		Vero Beach, FL 32963	
<u> </u>		•	<u> </u>	
				<u> </u>
				19
ama and straat addra				
anic and <u>street addre</u>	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> a	cceptable)	2021 M.SY 15 PH 2: 14
inic and <u>succe addre</u>	•	x <u>NOT</u> a	ecepiable)	-
Name:	Lisa A. Specht	x <u>NOT</u> a	ecepiable)	
Name:	Lisa A. Specht		cceptable)	
	•			
Name:	Lisa A. Specht		. Flurida 32801	· · ·

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]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: Name: Frederic Powers Name: ☐ Manager ☐ Manager Managing Member Address: □Member Address: 3320 Windsor Blvd. ___ Vero Beach, FL 32963 □ Authorized □ Authorized Person Person Other Other___ Other_____ □ Other _____ Name: _____ □ Manager Name: _____ □ Manager Address: _____ □Member Address: _______ ☐ Member □ Authorized ☐ Authorized Person Person Other___ □Other_____ □Other___ □Other Name: _____ □Manager Name: _____ ☐Manager Address: _____ ☐ Member ☐Member ☐ 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. Nonindexed 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 Frederic Powers

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "POWERS PRIVATE EQUITY 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 THIRTEENTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POWERS PRIVATE EQUITY LLC" WAS FORMED ON THE SECOND DAY OF MAY, A.D. 2012.

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

2022 HAY 15 PH 2: 14

Authentication: 203425077

Date: 05-13-22

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SR# 20221981733