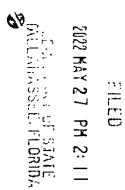
M2200008408

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U!	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:

Office Use Only



400388548204





T. LEMIEUX MAY 3 1 2022 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 712905 4812821

AUTHORIZATION :

COST LIMIT STANDON

ORDER DATE: May 27, 2022

ORDER TIME : 1:50 PM

ORDER NO. : 712905-005

CUSTOMER NO: 4812821

FOREIGN FILINGS

NAME: ICR SITES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJ	ICR Sites, LLC	
		Name of Limited Liability Company
		Liability Company for Authorization to Transact Business in Florida." Certificate of ne above referenced foreign limited liability company to transact business in Florida.
Please	return all correspondence concerning this	s matter to the following:
	Steven Bovino	
		Name of Person
	Norton Rose Fulbright US	LLP
		Firm/Company
Existence, a Please retur St Ma Re Di P.0 Ta	1301 Avenue of the Americ	cas
		Address
	New York, NY 10019	
		City/State and Zip Code
	steven.bovino@nortonrosefu	ulbright.com
	E-mail addre	ess: (to be used for future annual report notification)
For fu	rther information concerning this matter, p	please call:
	Steven Bovino	212 318-3082 at ()
	Name of Contact Pers	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Section
		Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following at Please make check payable to: FLORI \$\Bigsim\$ \$125.00 Filing Fee \$\Bigsim\$ \$130.00 Cer	DA DEPARTMENT OF STATE

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

IN COMPILANCE WITH SECTION 6/5,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in Fl	orida. The alt	errate name must include "Limited Lial	bility Company," "L.L.C," or "	LLC."}
Delaware					
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. (FEI number, if applicable)			
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration) ine penalty lia	ability)		
111 Veterans Blvd.,	Suite 1020	. 1	11 Veterans Blvd., Suite	1020	
Street Address of Principal Office)		6	(Mailing Address)		-
Metaire, LA 70005		N	Metaire, LA 70005		
		_			-
				<i>ψ</i>	
		_		***	-
Name and street address	ss of Florida registered agent: (P.O. Box	NOT as	contoble)		
Name and succe address	55 OF FIGHOR TOURS OF THE STATE	NOT ac	cepiable)	A C	
	Corporation Service Company			?7 	
Name:					Ü
	1201 Hays Street			2: 57A	
Office Address:	,		<u></u>	E I	
	Tallahassee		32301	<i>)</i>	
	(City)		, Florida (Zip code)		
	•				
egistered agent's accep aving been named as re	vance: gistered agent and to accept service of p	rocess fo	or the above stated limited li	ability company at th	e pla
signated in this applica	tion, I hereby accept the appointment as	s register.	ed agent and agree to act in	this capacity. I furth	her aj
	ions of all statutes relative to the proper	and com	plete performance of my du	ities, and I am familio	ır wii
comply with the provisi ad accept the obligation.	s of my position as registered agent. Corporation Service Company	6 :	2.0.		
	s of my position as registered agent.	jlim	a Baherci		

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: Name: Austin Rees Name: Ryan K. Nagim □Manager □ Manager 111 Veterans Blvd. STE 102
Address: ___ 111 Veterans Blvd. STE 102 Address: ___ **□**Member □Member Metaire, LA 70005 Metaire, LA 70005 Authorized Authorized Person Person □Other____ □Other_____ □Other_____ □Other____ Name: Judd Brazer Name: _____ □Manager □Manager Address: 15972 SW 15th Street □ Member ☐ Member Address: Pembroke Pines, FL 33027 Authorized ☐ Authorized Person Person □Other____ Other___ □Other Other □Manager □Manager Name: Address: 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

Typed or printed name of signee

Austin Rees

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ICR SITES, 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-SIXTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ICR SITES, LLC"
WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D. 2022.

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



Authentication: 203533548

Date: 05-26-22

6759505 8300 SR# 20222379502