N 2200000859

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

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 715331 7131809

AUTHORIZATION

COST LIMIT :(/\\$_125.00)

ORDER DATE: May 31, 2022

ORDER TIME : 2:31 PM

ORDER NO. : 715331-010

CUSTOMER NO: 7131809

FOREIGN FILINGS

NAME: KIDS EMPIRE PINE TRAIL WEST

PALM BEACH (FL) 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:

COVER LETTER

	KIDS EMPIRE PINE TRAIL WEST PA	ALM BEACH (FL) LLC				
UBJEC	Т:	Name of Limited Liability Company				
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florid				
lease ret	turn all correspondence concerning this matter	to the following:				
	Raquel Mehlman					
		Name of Person				
	Reed Smith LLP					
		Firm/Company				
	1001 Brickell Bay Drive					
		Address				
	Miami, FL 33131					
City/State and Zip Code						
	E-mail address: (to b	be used for future annual report notification)				
For furthe	er information concerning this matter, please co	all:				
		at (
-	Name of Contact Person	at ()				
Mailing Address:		Street Address:				
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
Tallahassec. 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 DE	PARTMENT OF STATE				
	□ \$125.00 Filing Fee □ \$130.00 Filing Fe Certificate	ee & 🗆 \$155.00 Filing Fee & 🗔 \$160.00 Filing Fee, Certificate				

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 TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

	TRAIL WEST PALM BEACH (FL)		· Company," "L.L.C.," or "L.L.C.")		
(If name unavailable, enter alternate n	name adopted for the purpose of transacting business i	in Florida. The	alternate name must include "Limited Lia	bility Company," "L.L.C," or "L	i.C ")
Delaware 2.		3.			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	ganized) (FEI number, if applicable)			
Upon Registration					
4	(Date first transacted business in Florida, if prio (See sections 605 0904 & 605 0905, F.S. to dete	to registration ermine penalty	i } liability)		
8605 Santa Monica I	Blvd. #49634	6	8605 Santa Monica Blvd.		
5(Street Address of Principal Office)		0.	(Mailing Address)		
West Hollywood, CA 90069		West Hollywood, CA 90069			
					
7. Name and street addres	<u>s</u> of Florida registered agent: (P.O. B	ox <u>NOT</u> a	acceptable)		
Name:	Corporation Service Company			-2 PM	
Office Address:	Office Address: 1201 Hays Street			3: 33 STATE E. FL	
	Tallahassee (Cin.)		32301 , Florida(Zip code)		

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: William Walner assisten + va president

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: Holding IP Parks USA LLC	□Manager	Name:		
■Member	Address: 8605 Santa Monica Blvd.	□Member	Address:		
□Authorized	#49634, West Hollywood, CA 90069	□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	

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.

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "KIDS EMPIRE PINE TRAIL WEST PALM BEACH

(FL) 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 SECOND DAY OF JUNE, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KIDS EMPIRE PINE TRAIL WEST PALM BEACH (FL) LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2022.

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

Authentication: 203580115

Date: 06-02-22