# M22000012901

(F	Requestor's Name)				
(A	vddress)				
(A	address)				
(C	City/State/Zip/Phone #)				
PICK-UP	MAIL MAIL				
(E	Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to	o Filing Officer:				





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2422 AUG 17 AH 10: 52

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S. ROBERTS AUG 1 7 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 8856337 4312468

 $(\wedge)$ 

COST LIMIT : \$ 125.00

ORDER DATE : August 16, 2022

ORDER TIME : 1:29 PM

ORDER NO. : 885633-030

CUSTOMER NO: 4312468

\_\_\_\_\_\_\_

### FOREIGN FILINGS

NAME: LION STREET FINANCIAL, 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: Eyliena Baker -- EXT#

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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Lion Street Financial.						
(Name of Foreign	a Limited Liability Company; must include "Limite	d Liabilit	y Company, "L.L.C.," or "LLC.")			_
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	lorida The	alternate name must include "Limited Liabi	ility Company,"	"L L C," o	 r "LLC."
Delaware, United States  2.   (Jurisdiction under the law of which foreign limited liability company is organized)		3.	(FEI number,			_
(Jurisdiction under the law of	which foreign limited liability company is organized)		(Fi:t number,	if applicable)		
4	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determine	registration	n.) Babilire)	<del></del>		
515 Congress Avenue			515 Congress Avenue			
Suite 2500			Suite 2500			
Austin. Texas 78701			Austin. Texas 78701	ML	2022 AU	
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT:	acceptable)		617	_; `
Name:	Corporation Service Company			 	AH 10: 5	
Office Address:	1201 Hays Street			,.	2	
			32301, Florida			
	(City)		(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.

Assistant Vice President
Registered 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: Name: Jayne Rothman Name: John Burmeister **■**Manager **■**Manager Address: \_\_\_ 1445 Ross Avenue Address: \_ □Member □Member Floor 22 **Suite 2500** □ Authorized □ Authorized Dallas, Texas 75202 Austin, Texas 78701 Person Person □Other □Other\_\_\_\_\_ □Other □Other Name: Name: □Manager □Manager □Member □Member Address: 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. 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

Javne Rothman, Manager

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LION STREET FINANCIAL, 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 SEVENTEENTH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LION STREET FINANCIAL, LLC" WAS FORMED ON THE SEVENTH DAY OF JANUARY, A.D. 2022.

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

Authentication: 204181401

Date: 08-17-22