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S. FRANKLIN

SEP 14 2022

# CT CORP

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

Date: 09/13/2022

Acc#I20160000072

*W: C DW*

Name:	PKY CLERMONT LAND, LLC
Document #:	
Order #:	14538996

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Amount: \$ 155.00

2022 09 13 AM 10:03

Thank you!

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:

1. PKY Clermont Land, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 88-3836449  
(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 800 N. Magnolia Avenue  
(Street Address of Principal Office)

Suite 1625

Orlando, Florida 32803

6. 800 N. Magnolia Avenue  
(Mailing Address)

Suite 1625

Orlando, Florida 32803

2022.11.13 11:10:33

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 2075 Centre Pointe Boulevard, Suite 101

Tallahassee, Florida 32308  
(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.

*Sandra Zizal*

(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:**

☒ Manager Name: PKY Clermont Owner, LLC  
☐ Member Address: 800 N. Magnolia Avenue  
☐ Authorized Suite 1625  
Person Orlando, Florida 32803  
☐ Other ☐ Other

☐ Manager Name: John Kosciulek  
☐ Member Address: 800 N. Magnolia Avenue  
☐ Authorized Suite 1625  
Person Orlando, Florida 32803  
☒ Other Vice President ☒ Other Treasurer

☐ Manager Name: Scott E. Francis  
☐ Member Address: 800 N. Magnolia Avenue  
☐ Authorized Suite 1625  
Person Orlando, Florida 32803  
☒ Other Vice President ☐ Other

**Title or Capacity:** **Name and Address:**

☐ Manager Name: James R. Heistand  
☐ Member Address: 800 N. Magnolia Avenue  
☐ Authorized Suite 1625  
Person Orlando, Florida 32803  
☒ Other President ☐ Other

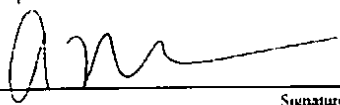
☐ Manager Name: A. Noni Holmes-Kidd  
☐ Member Address: 800 N. Magnolia Avenue  
☐ Authorized Suite 1625  
Person Orlando, Florida 32803  
☒ Other Vice President ☒ Other Secretary

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ 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

A. Noni Holmes-Kidd, Authorized Person

\_\_\_\_\_  
Typed or printed name of signer

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PKY CLERMONT LAND, 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 SEPTEMBER, A.D. 2022.

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

2022-09-13 17:16:33



Jeffrey W. Bullock, Secretary of State

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SR# 20223510226

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 204378919

Date: 09-13-22