

10/13/22, 11:44 AM

Division of Corporations

**M22000015875**

Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (954)208-0845  
Fax Number : (614)573-3996

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**Foreign Limited Liability Company  
Marvin F. Poer and Company, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
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OCT 14 2022

M. SOLOMON

# 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. MARVIN F. POER AND COMPANY, 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. Texas  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_  
(FEI number, if applicable)

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

5. 12720 Hillcrest Road  
(Street Address of Principal Office)

6. 12720 Hillcrest Road  
(Mailing Address)

#900

#900

Dallas, TX 75230

Dallas, TX 75230

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.

By: C T Corporation System  
Michael Seraphin Michael Seraphin, Asst. Secretary  
(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: Kristen Cunningham

☐ Member Address: 12720 Hillcrest Road #900

☐ Authorized Dallas, TX 75230

Person \_\_\_\_\_

☒ Other Asst. Secretary ☐ Other \_\_\_\_\_

☐ Manager Name: Kathryn McBride

☐ Member Address: 12720 Hillcrest Road #900

☐ Authorized Dallas, TX 75230

Person \_\_\_\_\_

☒ Other VP - Finance ☐ Other \_\_\_\_\_

☐ Manager Name: G. Brint Ryan

☐ Member Address: 12720 Hillcrest Road #900

☐ Authorized Dallas, TX 75230

Person \_\_\_\_\_

☒ Other President / CEO ☐ Other \_\_\_\_\_

Title or Capacity: Name and Address:

☐ Manager Name: John Heatley

☐ Member Address: 12720 Hillcrest Road #900

☐ Authorized Dallas, TX 75230

Person \_\_\_\_\_

☒ Other Managing Consultant ☐ Other \_\_\_\_\_

☐ Manager Name: Gerald L. Ridgely Jr

☐ Member Address: 12720 Hillcrest Road #900

☐ Authorized Dallas, TX 75230

Person \_\_\_\_\_

☒ Other Treasurer / CFO ☐ Other \_\_\_\_\_

☐ Manager Name: G. Brint Ryan

☐ Member Address: 12720 Hillcrest Road #900

☐ Authorized Dallas, TX 75230

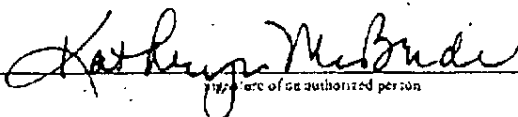
Person \_\_\_\_\_

☒ Other Director ☐ 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)

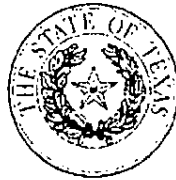
10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
 \_\_\_\_\_  
 Signature of an authorized person

Kathryn McBride

Typed or printed name of signer

Corporations Section  
P.O.Box 13697  
Austin, Texas 78711-3697



John B. Scott  
Secretary of State

## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Conversion for Marvin F. Poer and Company, LLC (file number 804445795), a Domestic Limited Liability Company (LLC), was filed in this office on February 09, 2022.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 12, 2022.



A handwritten signature in black ink, appearing to read "John B. Scott".

John B. Scott  
Secretary of State