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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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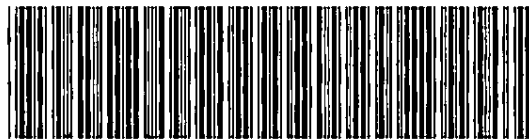
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 NOV 14 11:11 AM

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NOV 14 2022

S. ROBERTS

NOV 14 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ST. BARLOW LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

KATIE CHRISTNER

Name of Person

DUGGAN BERTSCH, LLC

Firm/Company

303 W. MADISON STREET, SUITE 1000

Address

CHICAGO, ILLINOIS 60606

City/State and Zip Code

DLITWIN@DUGGANBERTSCH.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATIE CHRISTNER

312
at ()

263-8600

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. ST. BARLOW 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. 88-2127468
(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. 241 DOMMERICH DRIVE
(Street Address of Principal Office)

6. 241 DOMMERICH DRIVE
(Mailing Address)

MAITLAND, FLORIDA 32751
MAITLAND, FLORIDA 32751

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

Name: JAMES N. BOND

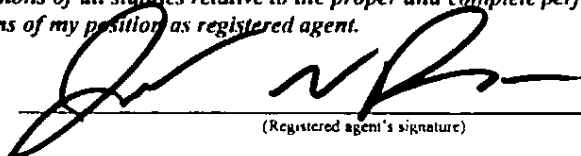
Office Address: 241 DOMMERICH DRIVE

MAITLAND, Florida 32751
(City) (Zip code)

2022 NOV 14 AM 11:41

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.


(Registered agent's signature)

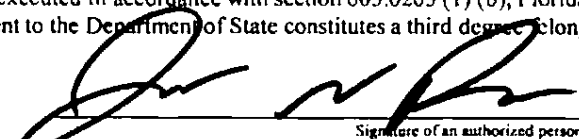
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: JAMES N. BOND	<input checked="" type="checkbox"/> Manager	Name: ANNA G. BOND
<input type="checkbox"/> Member	Address: 241 DOMMERICH DRIVE	<input type="checkbox"/> Member	Address: 241 DOMMERICH DRIVE
<input type="checkbox"/> Authorized	MAITLAND, FLORIDA 32751	<input type="checkbox"/> Authorized	MAITLAND, FLORIDA 32751
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address:	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized		<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address:	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized		<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> 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

JAMES N. BOND, MANAGER

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ST. BARLOW 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 FIRST DAY OF NOVEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ST. BARLOW LLC" WAS FORMED ON THE FOURTH DAY OF MAY, A.D. 2022.

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



6777312 8300

SR# 20223913266

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 204754055

Date: 11-01-22

DUGGAN db BERTSCH
ATTORNEYS AND COUNSELORS AT LAW

November 8, 2022

Privileged & Confidential
Via United Postal Service

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: St. Barlow LLC and The Nathan and Anna Bond Foundation, Inc.

To Whom It May Concern:

Enclosed please find the following for St. Barlow LLC:

1. Application for Authorization to Transact Business in Florida; and
2. Check to cover \$125 filing fee.

and The Nathan and Anna Bond Foundation, Inc.:

1. Articles of Incorporation (in duplicate); and
2. Check to cover \$70 filing fee.

Please return the filed documents using the enclosed pre-addressed envelope. If you have any further questions, or if we may otherwise be of service, please feel free to contact me at (312) 263-8600.

Best Regards,

DUGGAN BERTSCH, LLC



Isabelle Evans

ILE/slf
Encl.