

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
M22000018483

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H220004197753)))



H220004197753ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6343

From:
Account Name : C.T. CORPORATION SYSTEM
Account Number : PCA000000123
Phone : (854)208-0845
Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

Foreign Limited Liability Company
LD Acquisition Company 2 LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

2022 Dec 14 PM 3:36

APPROVED
AND
FILED
2022 DEC 14 PM 3:36
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 15 2022
K. Brumbley

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 05.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. LD Acquisition Company 2 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 87-4009619
(Jurisdiction under the law of which foreign limited liability company is organized) (FLL number, if applicable)

4. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0901 & 605.0902, F.S., to determine penalty liability)

5. 400 Continental Blvd 400 Continental Blvd
(Street Address of Principal Office) (Mailing Address)
Ste. 500 Ste. 500
El Segundo, CA 90245 El Segundo, CA 90245


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

Name: NRAI SERVICES, INC.
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

APPROVED
AND
FILED
2022 DEC 14 PM 3:36
CLERK OF DISTRICT COURT
NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

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:  NRAI SERVICES, INC. Alfred Younan
(Registered agent's signature) Assistant Secretary

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: <u>Josef Bobek</u>	<input checked="" type="checkbox"/> Manager	Name: <u>George Doyle</u>
<input type="checkbox"/> Member	Address: <u>400 Continental Blvd, Ste. 500</u>	<input type="checkbox"/> Member	Address: <u>400 Continental Blvd, Ste. 500</u>
<input type="checkbox"/> Authorized	<u>El Segundo, CA 90245</u>	<input type="checkbox"/> Authorized	<u>El Segundo, CA 90245</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other	<u></u>	<input type="checkbox"/> Other	<u></u>
<input checked="" type="checkbox"/> Manager	Name: <u>Daniel Parsons</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Arthur P. Brazy, Jr</u>
<input type="checkbox"/> Member	Address: <u>400 Continental Blvd, Ste. 500</u>	<input type="checkbox"/> Member	Address: <u>400 Continental Blvd, Ste. 500</u>
<input type="checkbox"/> Authorized	<u>El Segundo, CA 90245</u>	<input type="checkbox"/> Authorized	<u>El Segundo, CA 90245</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other	<u></u>	<input type="checkbox"/> Other	<u></u>
<input checked="" type="checkbox"/> Manager	Name: <u>Todd Ruggiero</u>	<input type="checkbox"/> Manager	Name: <u>Landmark Infrastructure Operating Company LLC</u>
<input type="checkbox"/> Member	Address: <u>400 Continental Blvd, Ste. 500</u>	<input checked="" type="checkbox"/> Member	Address: <u>400 Continental Blvd, Ste. 500</u>
<input type="checkbox"/> Authorized	<u>El Segundo, CA 90245</u>	<input type="checkbox"/> Authorized	<u>El Segundo, CA 90245</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other	<u></u>	<input type="checkbox"/> Other	<u></u>

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.

/s/Josef Bobek

Signature of an authorized person

Josef Bobek

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 "LD ACQUISITION COMPANY 2 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 DECEMBER, A.D. 2022.

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



6469535 8300

SR# 20224249787

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 205078438

Date: 12-13-22