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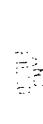
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CT CORP

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

03/03/2023

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Name:	RESERVE PADE	EL, LLC	
Document #:			
Order #:	14807722 - 6		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		ntry of Destination:	
Filing: 🗸	Certified: 🗸		Email Address for Annual Report Notifications:
	Plain: COGS:		Brían@boich.com
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	155.00	

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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. RESERVE PADEL, LE						
(Name of Foreign	Eimited Liability Company, must include "Limited	Liability Company," "L.L.C	'.,'' or "LLC.")			
If name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	onda. The alternate name must in	clude "Limited Liabili	ly Company," "L	. L C," or	"I.I.C "}
Delaware 2. (Jurisdiction under the law of which foreign limited liability company is organized)		3	(FIEI aumber, a	umber, «Lappheable)		
02/28/2023			·			
7.	(Date first transacted business in Florida, if prior to i (See sections 605 0904 & 605 0905, F.S. to determin	egistration (ne penalty liability)		<u> </u>		
6641 Dublin Center Di 5. (Street Address of Principal Office)	r,	6. P.O. Box 34029			_	_
Dublin, OH 43017		Columbus, OH	43234			
		-		: · · · · · · · · · · · · · · · · · · ·	2023 H	_
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)				•	1R -3	- - - - - - - - - - - - - - - - - - -
Name:	CT Corporation System			: . : -	PH 4: 2	~*
Office Address:	1200 South Pine Island Road				6	
	Plantation	, 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.

Kathryn A. Widdoes (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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: ____Padei Development Company, LLC □Manager □Manager Name: _____ Address: 6641 Dublin Center Dr. **■**Member □ Member Address: Dublin, OH 43017 □ Authorized □ Authorized Person Person □Other ☐ Other □ Other □Manager □Manager Name: Name: □Member □Member Address: Address: □ Authorized □Authorized Person Person □ Other_____ ☐ Other_____ ☐Other □Other_____ Name: _____ Name: _____ □Manager □Manager ☐ 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. <u>/s/Brian T. Murphy</u> ignature of an authorized person Brian T. Murphy Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RESERVE PADEL, 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 THIRD DAY OF MARCH, A.D. 2023.

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

Authentication: 202833500

Date: 03-03-23

7322515 8300 SR# 20230861465