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.

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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)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

**Entér 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 13TH FLOOR CASCADE HOLDINGS, LLC

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\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

TO:

Registration Section

H23000144988 3

COVER LETTER

Divisio	n of Corporation	DDS.						
SUBJECT:	th Floor Cascade	Holdings LLC						
Name of Limited Liability Company								
The enclosed "A Existence, and c	application by Fo	oreign Limited Liability Com ted to register the above refer	pany for Authoriz renced foreign lim	ation to Ti ited liabili	ransact Business in Florida," Certificate of ty company to transact business in Florida.			
Please return all	correspondence	concerning this matter to the	following:					
	Timothy Sand	lers						
	 -	7	lame of Person		***************************************			
	13th Floor Inv	estments						
	Firm/Company							
	2850 Tigertail Avenue, Suite 701							
	Address							
	Miami, FL 33133							
City/State and Zip Code								
	tsanders@13fi.c	om						
•		E-mail address: (to be use	d for future annua	l report no	tification)			
For further inform	nation concerni	ng this matter, please call:						
Timoth	y Sanders		78 6 at (220-04	160			
	Name	of Contact Person	Area Code	Day	ytime Telephone Number			
Division Registra P.O. Bo	NG ADDRESS n of Corporation tion Section x 6327 ssee, FL 32314			Division Registrat Clifton E 2661 Exc	F ADDRESS: of Corporations tion Section Building secutive Center Circle see, FL 32301			
Enclosed is a che	ck for the follow .00 Filing Fee	ring amount: \$\Boxed{\Omega}\$130.00 Filing Fee & Certificate of Status	S155.00 Filit Certified Copy	-	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

13th Floor Cascade Ho			
(Name of For	eign Limited Liability Company, must include "I	imited Liability Company," "L.L.C.,"	or "LC")
Of name unamilable arter of	le de la constant de		3
Liability Company," "L.L.C.	Iternate name adopted for the purpose of transact " or "I.L.C.")	ing cusiness in Florida. The afternate n	ame must include "Langed
2. Delaware	3 .		7 7 7 7 7 7 7 7 7 7
(Jurisdiction under the law company is organized)	of which toreign limited liability	(FEI number, if applicab	
4,			三十二
	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. t	i, if prior to registration.) o determine penalty liability)	- 1 53
5. 2850 Tigertail Avenue			三 三 三 三 二 二 三 三 二 二 二 二 二 二 二 二 二 二 二 二
Miami, Florida 33133			Ca.
	(Street Address of Principal Off	ice)	••
6. 2850 Tigertail Avenue,	Suite 701		- -
Miami, Florida 33133			
	(Mailing Address)		
7. Name and street addres	g of Florida registered agent: (P.O. Box NO	OT acceptable)	
Name:	Timothy Sanders	<u>v</u>	
	2850 Tigertail Avenue, Suite 701		
Office Address:		 	
	Miami (City)	, Florida 33133 (Zip code)	<u> </u>
designated in this application complywith the provision	gistered agent and to accept service of procition, I hereby accept the appointment as regons of all statutes relative to the proper and by position as registered agent.	gistered agent and agree to act in to complete performance of my dution	his capacity. I further agree
	(Registered agent's	signature)	
8. The name, title or capa	city and address of the person(s) who has/ha	ve authority to manage is/are:	
Amaud Karsenti, Manage	rof		
2850 Tigertail Avenue, Su	dte 701		
Miami, Florida 33133		,	
Attached is a certificate urisdiction under the law of the translator must be su	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is ibmitted) Signature of an authori	authenticated by the official having in a foreign language, a translation of	custody of records in the of the certificate under oath
	in accordance with section 605.0203 (1) (b), the Department of State constitutes a third d		
	Arnaud Karsenti		
	Typed or printed name of	of signee	_



Page 1

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

DELAWARE, DO HEREBY CERTIFY "13TH FLOOR CASCADE HOLDINGS, 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 ELEVENTH DAY OF APRIL, A.D. 2023.

AND I DO HERBBY FURTHER CERTIFY THAT THE SAID "13TH FLOOR CASCADE HOLDINGS, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2023.

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

7383247 8300 SR# 20231394582

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

Y Sur

Authentication: 203118993

Date: 04-11-23