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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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2022 -5 11111-52



S. ROBERTS MAY - 8 2023

• • Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956 Fax: 850.656.7953 www.incserv.com e-mail: accounting@incserv.com

incserv

ORDER FORM

FROM

.. **.** .

Melissa Moreau

850.656.7953

mmoreau@incserv.com

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

PRIORITY Regular Approval

OUR REF # (Order ID#) 1144485

. . :

REQUEST DATE 5/5/2023

EE HOLDING GROUP LLC

PLEASE PERFORM THE FOLLOWING SERVICES: EE HOLDING GROUP LLC (FL)

File the attached foreign qualification document

NOTES:

\$125.00 Authorized Email address for annual report reminders: Jean@clasinfo.com /

RETURN/FORWARDING INSTRUCTIONS:

. -

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, May 5, 2023

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

IN COMPLIANCE WITH SECTION 605/002, FLORIDA SEATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE SEATE OF FLORIDA:

name anavailable, enter alternate i	name adopted for the purpose of transacting business in F	londa. The ai	ternate name must include "Limited Liability (ompany," "I, I, C," or "LI,C	
Delaware		3			
(Jurisdiction under the law of which foreign limited liability company is organized)			(FLI number, il applicable)		
n/a					
	(Date first transacted business in Horida, if prior to (See sections 605 0904 & 605 0905, FS, to determ	registration ine penalty li	l ability)		
515 W. 23rd Street, Apt 3		:	515 W. 23rd Street, Apt 3		
eet Address of Principal Office)		0	(Mailing Address)		
New York, New York, 10011		New York, New York, 10011			
		-		1 : LŪZ	
Name and street addres	ss of Florida registered agent: (P.O. Box	- <u>NOT</u> ac	cceptable)		
	NRAI Services, Inc.			•, _ • • • • • • •	
Name:				<u>,</u>	
Name: Office Address:	1200 South Pine Island Road			G	

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.

Jean Malcomson, Asst. Secretary NRAI Services, Inc. of NRAI Services, Inc. By: TY(Registered agont's signature)

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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>	Name and Address:	<u>Title or Capacity</u>	<u></u>	Name and Address:
□Manager	Name:	□Manager	Name:	
□Member	Address: 515 W. 23rd Street. Apt 3	□Member	Address:	
Authorized	New York, New York, 10011	□Authorized		
Person		Person		
□Other	Other	Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
Other	Other	□Other		Dther
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
Authorized		Authorized		
Person		Person		
Other	Other	Other		Dther

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

Eric Emanuel

Typed or printed name of signee



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EE HOLDING GROUP 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 FOURTH DAY OF MAY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EE HOLDING GROUP LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D. 2023.

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



Authentication: 203281349 Date: 05-04-23

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SR# 20231827373 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1