

Md3000006703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

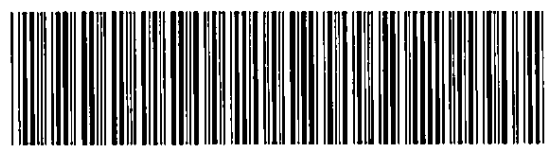
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700402724897

05/10/23--01012--005 \*\*125.00

2023 5 10 PM 5:23

T. LEMIEUX  
MAY 24 2023



**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. AMG II, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.")

(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. Arizona (Jurisdiction under the law of which foreign limited liability company is organized) 3. 86-0594015 (FEI number, if applicable)

4. 10/01/2022  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3550 N. Central Avenue  
(Street Address of Principal Office)  
Suite 400  
Phoenix, AZ 85012

6. P.O. Box 10  
(Mailing Address)  
Scottsdale, AZ 85252

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

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

2023 FEB 10 PM 5:21

**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.*

Stephanie Milnes Stephanie Milnes, Assistant VP  
(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]:

**Title or Capacity:**  Manager **Name and Address:** Name: Gary L. Shaw  
 Member Address: 3550 N. Central Avenue  
 Authorized Suite 400  
 Other \_\_\_\_\_  Other \_\_\_\_\_  
 Person Phoenix, AZ 85012 USA

**Title or Capacity:**  Manager **Name and Address:** Name: Garrett Neiffer  
 Member Address: 3550 N. Central Avenue  
 Authorized Suite 400  
 Other \_\_\_\_\_  Other \_\_\_\_\_  
 Person Phoenix, AZ 85012 USA

Manager **Name and Address:** Name: Gil Borok  
 Member Address: 6324 Canoga Avenue  
 Authorized Suite 100  
 Other \_\_\_\_\_  Other \_\_\_\_\_  
 Person Woodland Hills, CA 91367 USA

Manager **Name and Address:** Name: Karen Whitt  
 Member Address: 1110 N. Glebe Road  
 Authorized Suite 6110  
 Other \_\_\_\_\_  Other \_\_\_\_\_  
 Person Arlington, VA 22201 USA

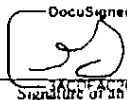
Manager **Name and Address:** Name: Matthew Hawkins  
 Member Address: 1140 Bay Street  
 Authorized Suite 4000  
 Other \_\_\_\_\_  Other \_\_\_\_\_  
 Person Toronto, ON M5S 2B4 CAN

Manager **Name and Address:** Name: \_\_\_\_\_  
 Member Address: \_\_\_\_\_  
 Authorized \_\_\_\_\_  
 Other \_\_\_\_\_  Other \_\_\_\_\_  
 Person \_\_\_\_\_

**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.

DocuSigned by:  
  
 Signature of an authorized person

Gary L. Shaw, Jr.  
 Typed or printed name of signee

# STATE OF ARIZONA



Office of the  
**CORPORATION COMMISSION**

## CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

**AMG II, LLC**

ACC file number: 23422910

was incorporated under the laws of the State of Arizona on 09/13/2022, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.

IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: **04/07/2023**



Handwritten signature of Douglas Clark.

Douglas Clark, Executive Director