## M23000007187

(I	Requestor's Name)	
(,	Address)	
(,	Address)	
(1	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL.
(1	Business Entity Name)	
(1	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to F	:	
(		

Office Use Only



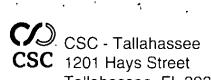
400409861494

2023 July - 2 - 1/1/11: 5/4



JUN 0 3 2023 K. Brumbi#1

M



Tallahassee, FL 32301-2607 850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 06/02/23 Order #: 1219003-7

Re: Bri N. Us Hwy 301, LLC Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

12000000195

AUTH:

Please take the following action: File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## 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. BRI N. US Hwy 301, Name of Foreign	Limited Liability Company; must include "Limite	d Liabilit	y Company," "L.L.C.," or "LLC.")		
If name unavailable, enter alternate i	name adopted for the purpose of transacting business in F	lorida The	alternate name must include "Limited Liability Con	npany," "L.L.C," or "LLC."	
Delaware		,	92-3753558		
(Jurisdiction under the law of which foreign limited liability company is organized)		٥.	3. (FEI number, if applicable)		
·	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registratio ine penalty	i ) liability)		
1345 6th Avenue 5.		6	27777 Franklin Road		
Street Address of Principal Office)		6(Mailing Address)			
32nd Floor, Suite B			Suite 900		
New York, NY 10105			Southfield, MI 48034		
. Name and <u>street addres</u>	s of Florida registered agent: (P.O. Box	<u>NOT</u> :	acceptable)		
Name:	Corporation Service Company			2023 JUG	
Office Address:	1201 Hays Street			-2 A	
	Tallahassee		32301 . Florida	=======================================	
	(City)		(Zip code)	<u>. u</u>	

## 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.

Corporation Service Company

Weilard-Snewson, Aup (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:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name:	□Manager	Name: Christopher Vohs
□Member	Address:	□Member	Address: 27777 Franklin Road
<b>■</b> Authorized	32nd Floor, Suite B	■Authorized	Suite 900
Person	New York, NY 10105	Person	Southfield, MI 48034
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	⊡Manager	Name:
□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. 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

Jordan Ruddy, Authorized Signatory

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "BRI N. US HWY 301, 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 FIRST DAY OF JUNE, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRI N. US HWY 301, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF APRIL, A.D. 2023.

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



Authentication: 203464440

Date: 06-01-23