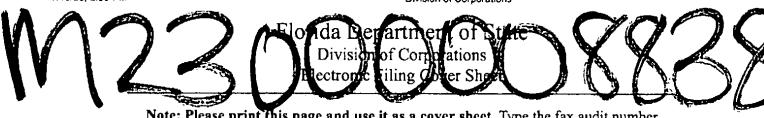
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Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

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Email Address: __cmatthews@landmarkdividend.com

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PEPARITO PH 3: 12 DEPARITORY OF STATE VISION SEE FLORIDA TALL CHASSEE FLORIDA

Foreign Limited Liability Company LD Acquisition Company 16 LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

IN COMPILANCE 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;

If game unavailable, enter alternate a	mme adopted for the purpose of transacting business in Flor	ida. The alternate came must include "Limited Lia	hility Company 171 1 C Tor 71 1 C To
Delaware		88-1656927	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(PPI numbe	r, if applicable)
Upon Filing			
··	(Date first transacted business in Plorida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determine	gistration.) peoalty tiability)	
400 Continental Blvd		400 Continental Blvd	
). Street Address of Principal Office)	-	6. (Mniling Address)	s e
Ste. 500		Ste. 500	SECUE TALL
El Segundo, CA 90245		El Segundo, CA 90245	覆石厂
. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	F 8: 5
Name:	NRAI SERVICES, INC.	·····	THE CO
Office Address:	1200 South Pine Island Road	 	
	Plantation	33324	

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.

By: Alfred Younan
(Registered agent's siAssistant 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:
■Manager	Name:		Name: George Doyle
□Member	Address: 400 Continental Blvd,Stc. 500	□Member	Address: 400 Continental Blvd,Stc. 500
□Authorized	El Segundo, CA 90245	□Authorized	El Segundo, CA 90245
Person		Person	
Other	Other	Other	Other
⊠Manager	Name: Daniel Parsons	□Manager	Name: Arthur P. Brazy, Jr
□Member	Address: 400 Continental Blvd,Stc. 500	□Member	Address: 400 Continental Blvd,Stc. 500
□Authorized	El Segundo, CA 90245	□Authorized	El Segundo, CA 90245
Person		Person	
Other	□ Other	Other	
☑Manager	Name: Todd Ruggiero	□Manager	Name: LMDV Issuer Co. LLC
□Member	Address: 400 Continental Blvd,Ste. 500	Member ■ Member	Address: 400 Continental Blvd,Ste. 500
□Authorized	El Segundo, CA 90245	□Authorized	El Segundo, CA 90245
Person		Person	
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.

/s/Josef Bobek		
	Signature of an authorized person	
Josef Bobek		
	Timed or printed name of sinner	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "LD ACQUISITION COMPANY 16 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 FIFTH DAY OF JULY, A.D. 2023.

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

6709728 8300

SR# 20232921666

Authentication: 203680959

Date: 07-05-23

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