Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITAL LEGAL GROUP PA

Account Number : I20210000025 : (305)676-0924 Fax Number : (305)676-0924

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

info@clglaws.com

Foreign Limited Liability Company Carrollwood GP IX, LLC

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Help

From: Lauren Sh

(((H23000260674 31))

COVER LETTER

| SUBJECT: | Carrollwood GP IX, LLC | | | | |
|--|--|-------------------|----------------------------------|---|---|
| | Name | of Limi | ted Liability (| Company | |
| The enclosed ' Existence, and | 'Application by Foreign Limited Liability Co check are submitted to register the above re | ompany ference | for Authoriza d foreign limit | ation to Transact Business in Fl ted liability company to transac | orida," Certificate et business in Flori |
| Please return a | all correspondence concerning this matter to | the follo | owing: | | |
| | Lauren Shapiro | | | | |
| | | Name | of Person | | |
| | Capital Legal Group, PA | | | | |
| | | Firm/0 | Company | | |
| | 1110 Brickell Avenue, Suite 505 | | | | |
| | | Λ | ldress | | |
| | Miami, FL 33131 | | | | |
| | Cit | y/State : | and Zip Code | | |
| | info@clglaws.com | | | | |
| | E-mail address: (to be t | used for | future annual | report notification) | |
| for further into | ormation concerning this matter, please call: | | | | |
| Laure | en Shapiro | at | 305 | 676-0924 | |
| | Name of Contact Person | — "" | Area Code | _) Daytime Telephone Nur | mber |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tulinhassee, FL 32314 | | | | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |
| | theck for the following amount: | ¢. | □ 61.55.00 | F.Y F | rv - 0 |
| !!! \$ | 125.00 Filing Fee S130.00 Filing Fe | | | _ | Filing Fee, Certific & Certified Copy |

(((H23000260674 3)))

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

IN COMPLEMCE WITH SECTION 605.0602, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| aine unavailable, enter alternate | name adopted for the purpose of transacting business in Flor | ida The alternate man | e must mobide "I imited hability | Company," "L.I. C." or "LI |
|---------------------------------------|---|---|----------------------------------|----------------------------|
| Delaware | | _ | | |
| (Jurisdiction under the law of v | shich foreign limited leability company is organized) | .5 | (F1) number, सं | अमुनिट्सनिट) |
| | | | | |
| | (Date first transacted business in Florida, if prior to t (See sections 605 0903 & 605 0905, E.S. to determine | registration) ne penalty faibility) | | |
| 905 West Platt Street | | 3225 S. | MncDill Ave, Suite 12 | 9-305 |
| (Street Address of | Principal Office) | 0 | (Mailing Address) | |
| ampa, FL 33606 | | Tampa. | FL 33629 | |
| | | | | |
| Name and <u>street addre</u> Name: | ss of Florida registered agent: (P.O. Box Victor Bonilla | <u>NOT</u> acceptab | le) | 2023 SE T |
| | | NOT acceptab | le) | SECRETALL |
| Name: | Victor Bonilla | | 33606 | SECRETARY SECRETARY |
| Name: | Victor Bonilla 905 West Platt Street | | | SECRETARY OF ST |

(Registered agent's signature)

(((H23000260674 3)))

| Title or Capacity: | Name and Address: |
|-----------------------------|---|
| MGR | Victor Bonilla |
| | 905 West Platt Street |
| | Tampa, Fl. 33606 |
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| | |
| | |
| e attachments if necessary) | |
| | no more than 90 days old, duly authenticated by the official having custody of records in organized. (If the certificate is in a foreign language, a translation of the certificate under |
| | dance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information out of State constitutes a third degree felony as provided for in s.817.155, F.S. |
| VA | Signature of an authorized person |
| | Signature of an authorized person |

Exped or printed name of signer



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARROLLWOOD GP IX, 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 TENTH DAY OF JULY, A.D. 2023.

7556582 8300 SR# 20232942839

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

Authentication: 203706493

Date: 07-10-23