M230000	009934
(Requestor's Name) (Address) (Address)	400412156134
(City/State/Zip/Phone #)	FILED 2023 JUL 31 PH 12: 07 7 March 2000 Concession
Special Instructions to Filing Officer	RECEIVED 1 2020 JUL 31 PH 4: 14 ALLAHASSEE, FLORID
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115 N CALHOUN ST., STE. 4 TALLAHASSEE. FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 12000000088

Date: 0	7/31/2023		
Name:	Merritt		
Reference #:_	207441	2	
Entity Name:_	13455 US	-90, GREENVILLE HOLDCO LLC	
✓ Articles		thorization to Transact Business	
🗌 Change	e of Agent		
🗌 Reinsta	tement		
Conver:	sion		
🗌 Merger			
🔲 Dissolu	tion/Withdrawal		
Fictitiou	s Name		
✓ Other_	CERT	TIFIED COPY OF THE FILING EVIDENCE	
Authorized Am	iount:\$	155	
Signature:	V	<u>nw</u>	

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€ EUROPEAN HQ COGENCY GLOBAL (UK) LIMITED REGISTERED IN ENGLAND 5 WALES. REGISTRY +801C712 6 LLOYDS AVE, UNIT 4CL LONDON EC3N 3AX +44 (0)20.3961.3080

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGN. LIMITED LABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name analysidable enter alternate name adopted for the narrows of transaction business in Florida. The alternate name must include "Limited Linklate Company," "L. L. C. "or "L. C. "or

13455 US-90, Greenville Holdco LLC 1.

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

2. Dela		3.			
(Jurisdiction under the law	of which foreign limited liability company is organized)		(FEI num)	ber, if applicable (
4	Upon Filing	redictration		<u>_</u>	
	Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	ine penalty	liabiluy)		
144 Shady Lane D 5.		6	144 Shady Lane Dr.		
5. (Street Address of Principal Off	ice)	0.	(Mailing Address)		
Lakewood NJ 0870)]		Lakewood NJ 08701	ی الا	
· <u>·······</u>		-			- 7
7. Name and <u>street ad</u>	dress of Florida registered agent: (P.O. Box	: <u>NOT</u> a	cceptable)	3	[""
Name:	COGENCY GLOBAL INC.			PH I2: 07 07 STATE 3555, PL	
Office Addre	115 NORTH CALHOUN ST., SUITE	4			
	TALLAHASSEE		32301 , Florida		
	(City)		(Zip code)		

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.

Registered agent's signature)

Sheila Carroll, Assistant 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]:

. . . .

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Title or Capacity:	Name and Address:	Title or Capacity;	Name and Address:
⊡Manager	Joe Neuman Name:	□Manager	Name:
□Member	Address:	□Member	Address:
Authorized	Lakewood NJ 08701	Authorized	
Person		Person	
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	

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.

Kelly Elis Signature of an authorized person

Kelly Ellis

Typed or printed name of signee

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "13455 US-90, GREENVILLE HOLDCO 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 THIRTY-FIRST DAY OF JULY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "13455 US-90, GREENVILLE HOLDCO LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JULY,

A.D. 2023.

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



Authentication: 203854782 Date: 07-31-23

Page 1

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SR# 20233118506 You may verify this certificate online at corp.delaware.gov/authver.shtml