Division of Corporations

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## Foreign Limited Liability Company **BIG VEFL Owner LLC**

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

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BIG VEFL Owner LLC

finame unavailable, enter alternate i	name adopted for the purpose of transacting husiness in Ele	orida. The afternate na	ame must include "Limited Liability Company," "L.L.C," or "LLC,	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI number, if applicable)	
ķ	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605,0905; F.S. to determin	registration ) ne penalty liability)		
30 N LaSalle St, Suite 4140		30 N L	LaSalle St, Suite 4140 (Mailing Address)	
Chicago, II. 60602		Chicago —	o, H. 60602	
	ss of Florida registered agent: 1P.O. Box	-	ole)	
. Name and street addres				
. Name and <u>street addres</u> Name:	United Agent Group Inc.			

## 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.

Tymberlyn Teefey Tymberlyn Teefey, Attorney-in-Fact

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: BIG Portfolio Parent LLC	□Manager	Name:
™Member	Address: 30 N LaSalle St, Suite 4140	□Member	Address:
□Authorized	Chicago, IL 60602	□Authorized	
Person		Person	
Other	□Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
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.

	Tymberlyn Teefey	
	Signatural of an authorized person	
Tymberlyn Teefey		
	Typed or printed name of signee	



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

DELAWARE, DO HEREBY CERTIFY "BIG VEFL OWNER 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 AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIG VEFL OWNER LLC" WAS FORMED ON THE EIGHTH DAY OF AUGUST, A.D. 2023.

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

Authentication: 203936982

Date: 08-10-23