M23001069

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T. LEMIEUX AUG 2 5 2023

COVER LETTER

i.

	Division of	Corporations					
UBJEC	Pipe V	iew, LLC					
		Name of Limited Liability Company					
he encle Existence	osed "Appl e, and chect	ication by Foreign Limited Liability k are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Florida.				
lease re	turn all con	respondence concerning this matter	to the following:				
	D	oreen Thoma					
	_		Name of Person				
	Р	ipe View, LLC					
	_	· · ·	Firm/Company				
	6	633 Boulevard 26					
	_		Address				
	R	ichland Hills, TX 76180					
	_	(City/State and Zip Code				
	Cor	mpliance@RabineGroup.com					
		E-mail address: (to b	e used for future annual report notification)				
For furth	er informat	ion concerning this matter, please ca	ill:				
Doreen Thoma		oma	224 268-7334 at ()				
		Name of Contact Person	at ()				
Mailing Address: Registration Section			Street Address: Registration Section				
Division of Corporations			Division of Corporations				
	P.O. Box 6327		The Centre of Tallahassee				
	Tallahass	ee. FL 32314	2415 N. Monroe Street, Suite 810				
			Tallahassee, FL 32303				
	Enclosed is	a check for the following amount:					
		e check payable to: FLORIDA DEI					
	□ \$125.00	Filing Fee S130.00 Filing Fe					





August 18, 2023

DOREEN THOMAS 2ND MAILING 900 NATIONAL PKWY STE 260 SCHAUMBURG, IL 60173

SUBJECT: PIPE VIEW, LLC Ref. Number: W23000101333

We have received your document for PIPE VIEW, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 923A00016584

Tracy L Lemieux Regulatory Specialist II

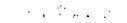
www.sunbiz.org

1 6 1 1 2 1 Ex

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:

Oclaware (Jurisdiction under the law of w	high foreign limited liability company is organized)	88-3946886		
	till Commence of the Commence	n	3946886	
N/A	men foreign fittured flability company is organized)	(FEI number, if applicable)		
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistration) penalty liability)	<u>—</u>	
6633 Boulevard 26		Same 6.		
er Address of Principal Office)		(Mailing Address)		
ame and street addres			· · ·	
Name:	Corporation Service Company	NOT acceptable)	2023 # 11.22 #	
		NOT acceptable)	2 2	
Name:	Corporation Service Company	NOT acceptable) 32301 Florida	2023 # 1 1 2	



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: PVA Holdco, LLC	□Manager	Name:
■Member	Address:	□Member	Address:
□Authorized	Azle, TX 76020	■ Authorized	North Richland Hills, TX 76180
Person		Person	
□Other	Other	Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
■ Authorized	Suite 260	□Authorized	
Person	Schaumburg, IL 60173	Person	
Other	□Other	□Other	□Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	Other	

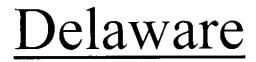
10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Typed or printed name of signee

Doreen Thoma

Doreen Thoma



The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "PIPE VIEW, 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 ELEVENTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PIPE VIEW, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2021.

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

Authentication: 203946704

Date: 08-11-23

5219680 8300 SR# 20233227665