Division of Corporations

Florida Department of State Division of Gorpolations Descronic Piling Gover theat

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000426704 3)))



H230004267043ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

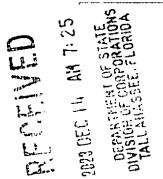
From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email	Address:			



Foreign Limited Liability Company Pintail Development LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Pintail Develonment LLC

	name adopted for the purpose of transacting business in Flu	00 0746464			
Delaware Thirdetion under the law of which foreign limited liability company is organized)		3. 93-3716164 (FEI number, if applicable)			
	, , ,		.,		
	(Date first transacted business in Flurida, if prior to t (See sections 605 0904 & 605 0905; F.S. to determine	registration.) ne penalty hability)			
7901 4th St	: N STE 300	6. 7901 4th St N STE 300 (Mailing Address)			
et Address of Principal Office)		(Mailing Address)			
St. Petersbi	urg FL 33702	St. Petersburg FL 33	3702		
		·			
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	262		
Name and <u>street addres</u>		NOT acceptable)	2023 DE		
Name and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Box Registered Agents Inc	NOT acceptable)	2023 DEC 1		
Name:	Registered Agents Inc	NOT acceptable)	14		
		NOT acceptable)			

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)

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: English, Matthew	□Manager	Name: Jurek, Kenneth
X Member	Address:	X :Member	Address:
□Authorized	7901 4th St N STE 300	□Authorized	7901 4th St N STE 300
Person	St. Petersburg FL 33702	Person	St. Petersburg FL 33702
□Other	Other	Other	Other
□Munager	Name:	□Munager	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	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.

Political Janes Senamic of an authorized person

Robin Jones



Page 1

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

DELAWARE, DO HEREBY CERTIFY "PINTAIL DEVELOPMENT 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 FOURTEENTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PINTAIL DEVELOPMENT LLC" WAS FORMED ON THE SECOND DAY OF OCTOBER, A.D. 2023.

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

Authentication: 204814658

Date: 12-14-23