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(((H23000433633 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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 THIRD LAKE VC IV GP, LLC

**FILE FIRST, BEFORE

| H2300043 | 3636 | |
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TO:

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H23000433633

COVER LETTER

| Third Lake VC IV GP, LLC | | | |
|--|--|--|--|
| Name of Limited Liability Company | | | |
| closed "Application by Foreign Limited Liability ice, and check are submitted to register the above | Company for Authorization to Transact Business in Florida," Certifi referenced foreign limited liability company to transact business in l | | |
| return all correspondence concerning this matter | to the following: | | |
| Christina T. Rodríguez. | | | |
| | Name of Person | | |
| c/o Haynes and Boone, LLP | | | |
| | Firm/Company | | |
| 2801 N. Harwood Street, Suite 2300 | | | |
| | Address | | |
| Dallas, Texas 75201 | | | |
| | City/State and Zip Code | | |
| rforsythe@thirdlake.com | | | |
| E-mail address: (to be | e used for future annual report notification) | | |
| ther information concerning this matter, please ca | it: | | |
| Robert Forsythe | 813 497.8100 | | |
| Name of Contact Person | at () Area Code Daytime Telephone Number | | |
| Mailing Address: | Street Address: | | |
| Registration Section Registration Section Division of Corporations Division of Corporations | | | |
| P.O. Box 6327 | Division of Corporations The Centre of Tallahassee | | |
| Tallahassee, FL 32314 | 2415 N. Monroe Street, Suite 810 | | |
| - manuscriptory a az araba a t | Tallahassee, FL 32303 | | |
| Enclosed is a check for the following amount: | | | |

H23000433633

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:

| | Limited Liability Company; mo | ist include "Limited Liabil | ity Company," "L.L.C.," or "LLC.") | | | |
|--------------------------------------|---|--|--|----------------------|-------------|--|
| f name unavailable, enter abernate n | same adopted for the purpose of tran | sacting business in Florida. Tr | e alternate name must include "Limited Liab | lility Company," "L. | L.C," or "L | .LC.") |
| Delaware | | _ | | | | |
| (Jurisdiction under the law of wh | bich foreign limited liability compan | ny is organized) | (FEI number, | if applicable) | | |
| | | | | | | |
| | (Date first transacted business (See sections 605.0904 & 605 | In Florida, if prior to registrati .0905, F.S. to determine penal | on.) ty liability) | | | |
| 1600 E. 8th Avenue, St | | | 1600 E. 8th Avenue, Suite Al | | | |
| reet Address of Principal Office) | · · · · · · · · · · · · · · · · · · · | 6. | (Mailing Address) | | | |
| Tampa, Florida 33605 | | | Tampa, Florida 33605 | | | |
| | | | | | | |
| | | | | | | |
| Name and street address | s of Florida registered ag | ent: (P.O. Box <u>NOT</u> | _acceptable) | :77 | 202 | |
| | | | | | | |
| | | | | <u>:</u> | 3 DEC | € 300 |
| Name: | Capitol Corporate Serv | ices, Inc. | | <u>:</u> | 2023 DEC 20 | ارسو مارس ارسو ارسو |
| Name: | Capitol Corporate Servi | ·-···································· | <u>. </u> | | 20 | ار المستحد المستحد المستحدد |
| Name: Office Address: | | ······································ | | | 20 PH | , and a second s |
| | | ······································ | 32301 | | 20 | The state of the s |

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

| Title or Capacity: | Name and Address: | Title or Capacity: | Name and Address |
|--------------------|-----------------------|-----------------------|-----------------------------|
| ■Manager | Name: Robert Forsythe | ■Manager | Name: Kenneth P. Jones |
| □Member | Address: | □Member | Address: 1600 E. 8th Avenue |
| □Authorized | Suite A132-A | □ Authoriz e d | Suite A132-A |
| Person | Tampa, Florida 33605 | Person | Tampa, Florida 33605 |
| □Other | Other | Other | Other |
|]Manager | Name: | □Manager | Name: |
| DMcmber | 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 |

- 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.

| /s/ Robert Forsythe | |
|---------------------------------------|-----------------|
| Signature of an authorized person | |
| Robert Forsythe | |
| Typed or printed name of signee | ·· · |
| December 20, 2023 | |

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "THIRD LAKE VC IV GP, 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 NINETEENTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THIRD LAKE VC IV GP, LLC" WAS FORMED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2023.

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

Authentication: 204861721

Date: 12-19-23