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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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K. Brumbley





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	02/23/2024	
	Patrice Rush	
	2273648	
		LEWIS CIRRUS LLC
		norization to Transact Business
☐ Ame	ndment	
☐ Char	nge of Agent	
☐ Rein	statement	
Conv	version	
☐ Merg	ger	
☐ Disse	olution/Withdrawal	
☐ Fictit	ious Name	
Othe	r	
Authorized	Amount: \$12	5.00
Signature:	Prett	

F: 800.944.6607

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:

(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.l	C.," or "LLC.")			
	ame adopted for the purpose of transacting business in Flo	7	Challeda M. Daired Fishel	tin Company"	"I C "o	 c
If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fil	orida Tije alternate name must	incide Chanco Cisto	my company.	1	,
Delaware		3				_
2. (Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, if applicable)			
4	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determi	registration.) ne penalty liability)		_		
One International Place	:	One Internati				
Street Address of Principal Office)		6(Mailing Ad	ldress)	 -		-
Suite 3900		Suite 3900				
2016 2400			<u>. </u>			_
Boston, MA 02110		Boston, MA	02110			
			. <u> </u>		2021	-
7. Name and street addres	NOT acceptable)		-	2024 FEB		
· · · -				:	B 2	-11~
	Cogency Global Inc.				ယ်	
Name:				· ·	===	ίΞ,
	115 North Calhoun St, Suit 4				<u>ئ</u>	
Office Address:					~	
	Tallahassee	. Flori	32301			
	(City)	, 1001	(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.

authory & Markey V.P.

(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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: West Shore Cirrus Holdings LLC Name: _____ □Manager □ Manager One International Place Address: _______ ☐ Member ■ Member Suite 3900 □ Authorized □ Authorized Boston, MA 02110 Person Person □ Other _____ □Other_____ □Other _____ Other Name: ______ □Manager □Manager Address: ______ Address: ______ ☐ Member □ Authorized □ Authorized Person Person □Other _____ ☐Other____ □Other_____ □Other ____ □Manager Name: ______ □Manager Address: □Member Address: ______ ☐ Member ☐ 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. 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. Lu Mits Signature of an authorized person Lee E. Rosenthal Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LEWIS CIRRUS 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEWIS CIRRUS LLC" WAS FORMED ON THE TWENTIETH DAY OF FEBRUARY, A.D. 2024.

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

Authentication: 202871750

Date: 02-23-24