# M24000003074

Office Use Only



000424653440

03/11/24--01001--019 \*\*250.00



2024 HAR 1 1 AH 11: 25

MAR 1 2 2024

K. Brumbley

# **CORPORATE**

When you need ACCESS to the world

ACCESS, \_

INC.

236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

|              |          |                   |               | WALK IN      |             |    |             |
|--------------|----------|-------------------|---------------|--------------|-------------|----|-------------|
|              |          |                   | PICK UP:      | MISTY 3/11   |             |    |             |
|              |          | CERTIFIED CO      | )<br>PPY      |              |             |    | <del></del> |
| 2            | XX       | РНОТОСОРУ         | <del></del> - |              |             |    | _           |
|              |          | CUS               |               |              |             | ., |             |
| <b>y</b>     | XX       | FILING            | FC            | OREIGN LLC   |             |    |             |
| 1.           |          | UNCOAST CRY       |               | R MHC LLC    |             |    |             |
| 2.           | (C       | ORPORATE NAME ANI | D DOCUMENT #) |              |             |    |             |
| 3.           | (C       | ORPORATE NAME ANI | D DOCUMENT #) |              | <del></del> |    |             |
| 4.           | -(C      | ORPORATE NAME ANI | D DOCUMENT #) |              |             |    |             |
| 5.           | (C       | ORPORATE NAME ANI | DOCUMENT #)   |              |             |    |             |
| 6.           | <u> </u> | ORPORATE NAME AND | DOCUMENT A.   |              |             |    |             |
| SPEC<br>INST | IAL      | IONS:             |               |              |             |    |             |
|              |          |                   | <del></del>   | <del>-</del> |             |    |             |

### COVER LETTER

| то:  | Registration Section Division of Corporations   |   |  |  |  |  |  |
|--|---|---|--|--|--|--|--|
| UBJE   | SUNCOAST CRYSTAL RIVER MHC, L   | LLC   |  |  |  |  |  |
| Name of Limited Liability Company  |   |   |  |  |  |  |  |
| The encl<br>Existenc   | losed "Application by Foreign Limited Liability<br>e, and check 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. |  |  |  |  |  |
| Please re  | eturn all correspondence concerning this matter   | to the following:   |  |  |  |  |  |
|  | D. SCOTT BAKER, ESQUIRE   |   |  |  |  |  |  |
|  |   | Name of Person  |  |  |  |  |  |
|  | ZIMMERMAN, KISER & SUTCLIF  | FE, P.A.  |  |  |  |  |  |
|  | Firm/Company  |   |  |  |  |  |  |
|  | 315 E. ROBINSON STREET. SUITE 600   |   |  |  |  |  |  |
|  |   | Address   |  |  |  |  |  |
|  | ORLANDO, FLORIDA 32801  |   |  |  |  |  |  |
| City/State and Zip Code  |   |   |  |  |  |  |  |
|  | REGISTEREDAGENT@ZKSRASER  | VICES.COM   |  |  |  |  |  |
|  | E-mail address: (to b   | e used for future annual report notification)   |  |  |  |  |  |
| For furth  | er information concerning this matter, please ca  | all:  |  |  |  |  |  |
|  | Jessica Snyder, Corporate Paralegal   | 407 425-7010<br>at ( )  |  |  |  |  |  |
|  | Name of Contact Person  | Area Code Daytime Telephone Number  |  |  |  |  |  |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 |   | Street Address:   |  |  |  |  |  |
|  |   | Registration Section  |  |  |  |  |  |
|  |   | Division of Corporations The Centre of Tallahassee  |  |  |  |  |  |
|  | Tallahassee, FL 32314   | 2415 N. Monroe Street, Suite 810  |  |  |  |  |  |
|  |   | Tallahassee, FL 32303   |  |  |  |  |  |
|  | Enclosed is a check for the following amount:   |   |  |  |  |  |  |
|  | Please make check payable to: FLORIDA DEI   | _   |  |  |  |  |  |
|  | ■ \$125.00 Filing Fee   |   |  |  |  |  |  |
|  | Cermicale   | of Status Certified Copy of Status & Certified Copy   |  |  |  |  |  |

## 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: SUNCOAST CRYSTAL RIVER MHC, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") 4lf name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") DELAWARE 99-1117443 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) **UPON REGISTRATION** (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 315 E ROBINSON STREET, SUITE 600 315 E ROBINSON STREET, SUITE 600 (Street Address of Principal Office) ORLANDO, FLORIDA 32801 ORLANDO, FLORIDA 32801 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) ZKS REGISTERED AGENT SERVICES, LLC Name: 315 E ROBINSON STREET, SUITE 600 Office Address: ORLANDO . Florida (City) 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.

D. Sedt Boke

(Registered agent's signature)

| Capacity: Name and Address:   | Title or Capacity   | <u>y:</u>   | Name and Address:   |
|---|---|---|---|
| nger Name: GMF SIDE CAR HOLDINGS II, LLC  | □Manager  | Name:   |   |
| ber Address: 315 E. ROBINSON STREET   | □Member   | Address:  |   |
| orized SUITE 600  | □Authorized   |   |   |
| ORLANDO, FLORIDA 32801  | Person  |   |   |
| Other   | □Other  |   | □Other  |
| iger Name:  | □Manager  | Name:   | <u></u> .   |
| ber Address:  | □Member   | Address:  |   |
| prized  | □Authorized   |   |   |
| on  | Person  |   |   |
| Other   | □Other  |   | Other   |
| ger Name:   | □Manager  | Name:   |   |
| ber Address:  | □Member   | Address:  |   |
| prized  | □Authorized   |   |   |
| on  | Person  |   |   |
| Other   | □Other  |   | Other   |
| thed is a certificate of existence, no more than 90 days old, dution under the law of which it is organized. (If the certificate is anslator must be submitted)  document is executed in accordance with section 605.0203 (d in a document to the Department of State constitutes a third | ida Department of Sta<br>ly authenticated by th<br>s in a foreign languag<br>l) (b). Florida Statute<br>degree felony as prov   | te Annual Rep e official havir e, a translation s. I am aware t   | ort form.  In a custody of records in the control of the certificate under out that any false information   |
| individuals may be added<br>hed is a certificate of existe<br>ion under the law of which<br>anslator must be submitted<br>document is executed in a   | to the index when filing your Florience, no more than 90 days old, due it is organized. (If the certificate is) secondance with section 605.0203 (partment of State constitutes a third | to the index when filing your Florida Department of Statence, no more than 90 days old, duly authenticated by the it is organized. (If the certificate is in a foreign language)  accordance with section 605.0203 (1) (b), Florida Statute | to the index when filing your Florida Department of State Annual Repence, no more than 90 days old, duly authenticated by the official having it is organized. (If the certificate is in a foreign language, a translation)  accordance with section 605.0203 (1) (b), Florida Statutes, I am aware to partment of State constitutes a third degree felony as provided for in s.8 |

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "SUNCOAST CRYSTAL RIVER MHC, 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 EIGHTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNCOAST CRYSTAL RIVER MHC, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF DECEMBER,

A.D. 2023.

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

at corp delaware gov/auti

Authentication: 202982395

Date: 03-08-24