MAMON BROWN

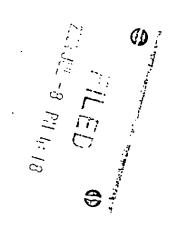
(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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T. LEMIEUX **ÜUL 1 2 2024**

COVER LETTER

TO: R	egistration Section ivision of Corporations	
SUBJECT	CENTAUR-SC LLC	
		Name of Limited Liability Company
The enclose Existence,	ed "Application by Foreign Limit and check are submitted to registe	ed Liability Company for Authorization to Transact Business in Florida," Certificate our the above referenced foreign limited liability company to transact business in Florida.
Please retu	m all correspondence concerning	this matter to the following:
	RICHARD G. CHERRY	
		Name of Person
	CHERRY, EDGAR & SM	TTH P.A.
		Firm/Company
	8409 N. MILITARY TRA	IL, SUITE 123
		Address
,	PALM BEACH GARDEN	IS, FL 33410
		City/State and Zip Code
	pote@panthernational.com	
	E-mail ad	dress: (to be used for future annual report notification)
For further	information concerning this matte	er, please cali:
RI 	ICHARD G. CHERRY	561 471-7767
	Name of Contact P	erson Area Code Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Ple	\$125.00 Filing Fee	Tallahassee, FL 32303





June 21, 2024

RICHARD G CHERRY 8409 N MILITARY TR STE 123 PALM BEACH GARDENS, FL 33410

SUBJECT: CENATUR-SC LLC Ref. Number: W24000094292

We have received your document for CENATUR-SC LLC and your check(s) totaling \$130.00. 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: 024A00013617

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

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 RECISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CENATUR-SCILC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC.," or "LLC.") (If same anavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate mane must include "Limited Liability Company," "L.L.C," or "LLC.") DELAWARE 30-1410382 (Jurisdiction under the law of which foreign limited liebility company is organized) (FEI mumber, if applicable) APRIL 4, 2024 (Dete first transacted business in Florida, if prior to registration.)
(Sen sections 605,0904 & 605,0905, F.S. to determine penalty liability) 7111 FAIRWAY DRIVE, SUITE 202 8409 N. MILITARY TRAIL, SUITE 123 (Street Address of Principal Office) PALM BEACH GARDENS, FL 33418 PALM BEACH GARDENS, FL 33410 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Jason Pote Name: 7111 FAIRWAY DRIVE, SUITE 202 Office Address: PALM BEACH GARDENS 33418

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.

Florida

(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: CENTAUR JV HOLDINGS LLC KS INVESTORS, LLC ■Manager □Manager 7111 Fairway Dr, Suite 202 ■Member 7111 Fairway Dr. Suite 202 **■**Member DOMINIK SENN PALM BEACH GARDENS, FL 33418 Authorized **■**Authorized PALM BEACH GARDENS, FL 33418 SURINDER CHABRA Person Person Managing Membe PRESIDENT **■** Other Other □ Other □ Manager □Manager Name: 7111 Fairway Dr, Suite 202 □Member ☐ Member Address: ____ PALM BEACH GARDENS, FL 33418 ■ Authorized ☐ Authorized Person Person Other ☐ Other_____ Other Other □Manager □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, P.S.

JASON POTE Typed or printed name of signoe

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CENTAUR-SC 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 THIRD DAY OF JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTAUR-SC LLC"

WAS FORMED ON THE FOURTH DAY OF APRIL, A.D. 2024.

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



Authentication: 203859461

Date: 07-03-24

3392320 8300 SR# 20243062897