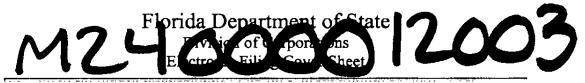
Division of Corporations



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From:

Account Name : CAPITOL SERVICES, INC.

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

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బ్లేజున టైల్జ్mail Address: ä

Foreign Limited Liability Company 136 CAPE CORAL PARKWAY LLC

Certificate of Status	0
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•	ration Section n of Corporations			
SUBJECT: 13	6 CAPE CORAL PARKWAY LLC Name of Lin	nited Liability Company		
		y for Authorization to Transact Business in Florida," Certificate of ed foreign limited liability company to transact business in Florida.		
Plcase return all	correspondence concerning this matter to the fo	llowing:		
	Nam	e of Person		
	Capitol Services - Corporate Filings	Company		
IMPORTANT:	515 East Park Avenue 2nd FI			
entered here will be utilized for future annual	Tallahassee, FL 32301			
eport notifications and possibly other OTIFICATIONS	City/State and Zip Code			
from the STATE to the entity!	y! E-mail address: (to be used for future annual report notification)			
For turner into	mation concerning this matter, please call:	ar (855) 498 - 5500		
	Name of Contact Person	Area Code Daytime Telephone Number		
Divisio Registr P.O. Bo	nof Corporations ation Section by 6327 ssec, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Please	ed is a check for the following amount: make check payable to: FLORIDA DEPARTM 25.00 Filing Fee \$\text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & S160.00 Filing Fee, Certificate		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 136 CAPE CORA	L PARKWAY LLC		
(Name of Foreign	Limited Liability Company; must include "Limited Liability	Company," "L.L.C.," or "LLC.")	
If name unavailable, onter alternate :	name adopted for the purpose of transacting business in Florida. The alte	mate name must include "Limited Liability Company	," "J.L.C," or "J.J.C.")
DELAWARE	3.		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI number, if applicable	e)
i			
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty in	ability)	
130 - 136 CAPE	CORAL PARKWAY 6.	10728 NW 2ND AVE (Maiking Address)	
0405 00041 5	1 22004 ·	ALABAL EL 224EO	
CAPE CORAL, F	L 33904	MAMI, FL 33169	
			202
Name and street addres	ss of Florida registered agent: (P.O. Box NOT ac	centable)	F. S.
	2011.01.00.10g.00010d.ugotti. (1.01.001. <u>110.</u>	<i>-</i>	
Name:	Capitol Corporate Services, Inc.		
	515 East Park Avenue 2nd Fl		٠. <u>ن</u>
Office Address:	515 East Park Avenue 2nd Fi		0
	Tallahassee (Cay)	, Florida <u>32301</u> (Zin code)	
andstand agentle secon	,	(Lip 4446)	
lesignated in this applica o comply with the provis	nance: egistered agent and to accept service of process fi tion, I hereby accept the appointment as register ions of all statutes relative to the proper and com s of my position as registered agent.	ed agent and agree to act in this cap	acity. I further agr
, ,	Kim Tadlock	Klm Tadlock, Asst. Secrete behalf of Capitol Corpora	•

8. For initial index manage (up to six (6	ing purposes, list names, title or capacity and a s) total]:	iddresses of the primary m	embers/managers	or persons authorized to
Title or Capacity:	Name and Address:	Title or Capacity:	<u>N</u>	ame and Address:
Manager	Name: JEAN JEROME	Manager	Name:	
Member	Address: 10728 NW 2ND AVE	☐ Member	Address:	
Authorized	MIAMI, FL 33169	☐ Authorized		
Person		Person		
Other	Other	Other		Other
Manager	Name:	☐ Manager	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
indexed individuals 9. Attached is a certifurisdiction under the of the translator must	r	orida Department of State duly authenticated by the e is in a foreign language,	Annual Report for official having cus a translation of the	rm. stody of records in the e certificate under oath
	s executed in accordance with section 605.0203 ment to the Department of State constitutes a th			
/s/ Jean D Jerome				
JEAN D JEROME Typed or printed name of signee				
	i yped or	hetietri terite or state.		



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "136 CAPE CORAL PARKWAY 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 BIGHTEENTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HERBY FURTHER CERTIFY THAT THE SAID "136 CAPE CORAL PARKWAY LLC" WAS FORMED ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2024.

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

5150714 8300
SR# 20243720294
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204421552

Date: 09-18-24