

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : JOHNSON POPE - CLEARWATER  
Account Number : I20230000160  
Phone : (727)461-1818  
Fax Number : (727)441-8617

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: LINDAB@JPFIRM.COM

**Foreign Limited Liability Company  
PROVIDENT RESORT MANAGEMENT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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OCT 29 2024

C. Brumbley

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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:

1. PROVIDENT RESORT MANAGEMENT, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 59-1870484

(FBI number, if applicable)

4. August 28, 2024

(Date first transacted business in Florida, if prior to registration,  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 107 Hampton Road, Suite 100

(Street Address of Principal Office)

Clearwater, FL 33759

6. 107 Hampton Road, Suite 100

(Mailing Address)

Clearwater, FL 33759

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Chestnut Business Services, LLC

Office Address: 311 Park Place Blvd., Suite 300

Clearwater,

(City)

Florida 33759

(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.

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Manager

PHR Holdings, Inc.

107 Hampton Road, Suite 100  
Clearwater, FL 33759

(Use attachments if necessary)

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.

Signature of an authorized person

Nicholas J. Grimaudo

Typed or printed name of signer

APPROVED  
AND  
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DEPARTMENT OF STATE  
TALLAHASSEE, FL 32399

# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROVIDENT RESORT MANAGEMENT, 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-FOURTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROVIDENT RESORT MANAGEMENT, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF AUGUST, A.D. 2024.

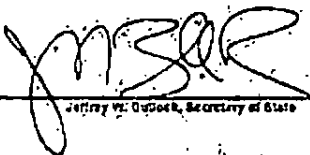
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 204474379

Date: 09-24-24