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(R	Requestor's Name)
A)	(ddress)
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(C	ity/State/Zip/Phone #)
	WAIT MAIL
(E	usiness Entity Name)
(D	Pocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer.
	Office Use Only

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FILED 2024 DEC 12 PH 3: 28

21121 DEC 12 PH 3: 18

CSC - Wilmington 251 Little Falls Drive Wilmington, DE 19808-1674 800-927-9800, Ext: x66697 302-636-5454

To: Department Of Commerce, Division Of Corporations & Commercial Code From: Claire Groft - Claire.Groft@cscglobal.com Ext: x66697 Date: 12/12/24 Order #: 1724407-2 Re: Benefit Recovery Solutions, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find: Change of Registered Agent and Office Check in the amount of: \$13

Please take the following action: File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Claire Groft c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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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 BUSINENS IN THE STATE OF FLORIDA:

Argo SMI Conch Harbor, LLC, Conch Harbor PropCo Series

	_ , <u> </u>	orida inca	ternate name must include "Limited Liability Company," "L.L.C." or ".
Delaware		3	33-2338043
(Jurisdiction under the law of w	nich foreign limited liability company is organized)	.).	(FEI number, if applicable)
Upon filing			
·	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determin	egistration ie penalty li	ability)
17330 Preston Road	, Suite 100C		17330 Preston Road, Suite 100C
Street Address of Principal Office)		0	(Mailing Address)
Dallas, TX 75252		-	Dallas, TX 75252
Dallas, TX 75252	s of Florida registered agent: (P.O. Box Corporation Service Company	-	
Dallas, TX 75252	<u>s</u> of Florida registered agent: (P.O. Box	- <u>NOT</u> ac	ceptable)
Dallas, TX 75252 Name and <u>street addres</u> Name:	s of Florida registered agent: (P.O. Box Corporation Service Company 1201 Hays Street	- <u>NOT</u> ac	ceptable)

and accept the obligations of my position as registered agent. Corporation Service Company By:

(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:	<u>Title or Capacity:</u>	Name and Address:	
□Manager	Name: Argo PropCo HoldingCo, LLC	□Manager	Name: Argo TRS OpCo, LLC	
Member	Address:	Member	Address:	
□Authorized	Suite 100C	Authorized	Suite 100C	
Person	Dallas, TX 75252	Person	Dallas, TX 75252	
□Other	Other	Other	Other	
□Manager	Name:	□ Manager	Name: Chris Petty	
□Member	Address:	□Member	Address:	
■Authorized	Suite 100C	Authorized	Suite 100C	
Person	Dallas. TX 75252	Person	Dallas. TX 75252	
□Other	Other	Other	Other	
□Manager	Name:	□Manager	Richard Carter	
□Member	Address:	□Member	Address:	
Authorized	Suite 100C	🚍 Authorized	Suite 100C	
Person	Dallas, TX 75252	Person	Dallas, TX 75252	
□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, F.S.

/s/ Bryan C. Redmond

	Signature of an authorized person	
<u> </u>	,	

Bryan C. Redmond

Typed or printed name of signce

CSC OUAL-53769



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARGO SMI CONCH HARBOR, LLC, CONCH HARBOR PROPCO SERIES" 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 ELEVENTH DAY OF DECEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "ARGO SMI CONCH HARBOR, LLC, CONCH HARBOR PROPCO SERIES" IS A SERIES LLC REGISTERED SERIES.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARGO SMI CONCH HARBOR, LLC, CONCH HARBOR PROPCO SERIES" WAS FORMED ON THE TENTH DAY OF DECEMBER, A.D. 2024.



of State

Authentication: 205101889 Date: 12-11-24

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SR# 20244461128 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1