# M25000000901

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### COVER LETTER

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TO:

Registration Section

JECT:	NP2022 Holdings, LLC					
	Name of Limited Liability Company					
enclosed ence, an	"Application by Foreign Limited Liability d check are submitted to register the above	Company for Authorization to Transact Business in Florida," Creferenced foreign limited liability company to transact business				
e return	all correspondence concerning this matter t	to the following:				
	Anthony Adams					
	Name of Person					
	FP Transitions					
		Firm/Company				
	4900 Meadows Road, Ste 300					
Address						
	Lake Oswego, OR 97035					
		City/State and Zip Code				
	mike.polan@nm.com					
	E-mail address: (to be	e used for future annual report notification)				
irther in	formation concerning this matter, please ca	M:				
Aili	sh Duff	503 212-2053 at ( )				
	Name of Contact Person	at () Area Code Daytime Telephone Number				
Mailing Address: Registration Section		Street Address: Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Pleas	osed is a check for the following amount: se make check payable to: FLORIDA DEF 125.00 Filing Fee	ie & 🗆 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee, Ce				

# 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. NP2022 Holdings, LLo					
(Name of Foreign	Limited Liability Company, must include "Limite	d Liability	Company," "L.L.C.," or "LLC.")		
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. The	alternate name must include "Limited Liability Comp	any," "LLC," or "LLC."	
Illinois 2	hich foreign limited liability company is organized)	3.	88-2748390		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number, if applica	FEI number, if applicable)	
4	Day for the second business of the second		·		
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration ine penalty	.) liability)		
1901 Butterfield Rd, Ste 300			1901 Butterfield Rd, Ste 300		
5(Street Address of Principal Office)		<b>0.</b>	(Mailing Address)		
Downers Grove, IL 60	515		Downers Grove, IL 60515		
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT a	cceptable)	3 (	
				8	
Name:	Michael Polan			727	
Office Address:	2601 Cattlemen Rd, Ste 201			7 · · · · · · · · · · · · · · · · · · ·	
	Sarasota		34232 , Florida	: 07	
	(City)		(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. 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:
■Manager	Name: Michael Polan	■Manager	Name: Kevin Olson
□Member	Address: 2601 Cattlemen Rd, Ste 201	□Member	Address: 1901 Butterfield Rd, Ste 300
□Authorized	Sarasota, FL 34232	□Authorized	Downers Grove, IL 60515
Person		Person	
Other	Other	□Other	Other
■Manager	Name: Carmeio Barbaro	■Manager	Name: David Milonas
□Member	Address: 1901 Butterfield Rd, Ste 300	□Member	Address: 1901 Butterfield Rd, Ste 300
□Authorized	Downers Grove, IL 60515	□Authorized	Downers Grove, IL 60515
Person		Person	
Other	Other	□Other	Other
■Manager	Name: Thomas Rossi	□Manager	Name:
□Member	Address: 1901 Butterfield Rd, Ste 300	[]Member	Address:
□Authorized	Downers Grove, IL 60515	□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, F.S.

Signature of an authorized person

Michael Polan

Typed or printed name of signer

## File Number

#### 1193140-5



# To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

## Department of Business Services. I certify that

NP2022 HOLDINGS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 10, 2022, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.

day of OCTOBER A.D.



**In Testimony Whereof,** I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 28TH

Authentication #: 2430203866 verifiable until 10/28/2025

Authenticate at: https://www.ilsos.gov

Aley Sianard

2024