6/19/25, 11 54 AM

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000218709 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (859)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 Fax Number : (845)518-3588

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

Email Address:_

Foreign Limited Liability Company 2387 Industrial Blvd Holding LLC

Certificate of Status	I
Certified Copy	0
Page Count	0.3
Estimated Charge	\$130.00

K. SALY

IUN 1 9 2025

Electronic Filing Menu

Corporate Filing Menu

Help

To: , Page 23 of 24 2025-06-19 16:01 08 GMT 18886118813 From Vcorp Services, LLC

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

IN COMPLANCE WITH SECTION (05/05), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 2387 Industrial Blvd Holding LLC (Name of Foreign Limited Liability Company) must include "Limited Liability Company," "L.E.C.," or "LLC.") III many unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name maja include "I inition frability Company," (4.1. C. "or "FFC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first immacfed business in Florida, (Option to registration)). (See sections 605-0903, C-605,0905, I'S) to determine penalty habilities. 1201 N. Orange Street, Suite 7494 1201 N. Grange Street, Suite 7494 6. (Mining Address) (Street Address of Principal Office) Wilmington, DE 19801 Wilmington, DE 19801 7. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable) Veorp Agent Services, Inc. Name: 1200 South Pine Island Road Office Address: Plantation 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.

Muni Sanik, Secretary

(Registered agent's signature)

4s/ Mimi Sanik

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	i	Name and Address:
□Manager	Name:Sarasota Shallow Bay Holding LLC	□Manager	Name:	
≣Member	Address: 1201 N Orange Street	\Box Member	Address:	
□Authorized	Suite 7494	□Authorized		
Person	Wilmington, DE 19801	Person		
□Other		[]Other		
⊞Manager	Name:	CiManager	Name:	
□Member	Address:	□Member	Address:	337 50 1
□Authorized		□.Authorized		
Person		Person		
Other	□Other	. Other		
⊏Manager	Name:	∏Manager	Name:	
□Member	Address:	□Member	Address:	
☐Authorized		□Authorized		
Person		Person		
□Other		∐Other		_lOther

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 8.817.155, F.S.

:		
	Signature of an authorized person	
Itay Goren		
	Exped or printed name of signer	

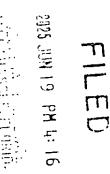
Delaware The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE
OF DELAWARE, DO HEREBY CERTIFY "2387 INDUSTRIAL BLVD HOLDING 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 EIGHTEENTH DAY OF JUNE, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2387 INDUSTRIAL BLVD HOLDING LLC" WAS FORMED ON THE SIXTEENTH DAY OF JUNE, A.D. 2025.

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





10229853 8300

SR# 20253109572

Charuni Patibanda-Sanchez, Secretary of State
Authentication: 203978922

C. G. Sanchen

Date: 06-18-25