

M2100000 5455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

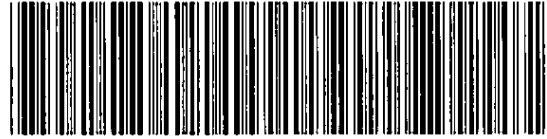
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



800365686188

RECEIVED
2021 MAY -6 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
FILED
2021 MAY -6 AM 8:48

MAY 07 2021

Brumbley



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

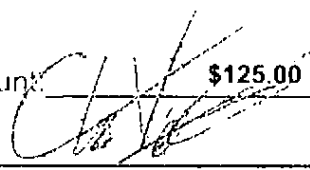
Date: 05/05/2021

Name: Chris Vick

Reference #: 1367722

Entity Name: PUNTA GORDA PROPCO LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other _____

Authorized Amount:  \$125.00

Signature: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Punta Gorda PropCo LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Colleen Humes

Name of Person

Cogency Global Inc.

Firm/Company

850 New Burton Rd #201

Address

Dover, DE 19904

City/State and Zip Code

chumes@cogencyglobal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Colleen Humes

Name of Contact Person

at (518)

Area Code

213.0848

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy

\$160.00 Filing Fee, Certificate
of Status & Certified Copy

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. Punta Gorda PropCo 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. (FIC number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0104 & 605.0105, F.S. to determine penalty liability)

5. 68 S. Service Rd., Suite 120 (Street Address of Principal Office)
Melville, NY 11747
6. 68 S. Service Rd., Suite 120 (Mailing Address)
Melville, NY 11747

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

Name: COGENCY GLOBAL INC.

Office Address: 115 North Calhoun St. Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

2021 MAY - 6 AM 8:48
APPROVED AND FILED

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.

Colleen Humes

(Registered agent's signature)

[] 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:
 Manager Name: Jill A. Matarese
 Member Address: 68 S. Service Rd., Suite 120
 Authorized Melville, NY 11747
Person _____
 Other _____ Other _____

Title or Capacity: Name and Address:
 Manager Name: John L. Fridlington
 Member Address: 68 S. Service Rd., Suite 120
 Authorized Melville, NY 11747
Person _____
 Other _____ Other _____

Manager Name: Kevin J. Corrigan
 Member Address: 68 S. Service Rd., Suite 120
 Authorized Melville, NY 11747
Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
Person _____
 Other _____ Other _____

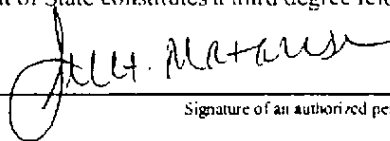
Manager Name: _____
 Member Address: _____
 Authorized _____
Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
Person _____
 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.

[] 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. 17.155, F.S.



Signature of an authorized person

Jill A. Matarese, Vice President

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PUNTA GORDA PROPCO 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 FOURTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PUNTA GORDA PROPCO LLC" WAS FORMED ON THE THIRTIETH DAY OF APRIL, A.D. 2021.

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



5886989 8300

SR# 20211588897

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203124767

Date: 05-04-21