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DATE:

12/04/2023

NAME: WRIGHT BROTHERS DEVELOPMENT XXIV, LLC

TYPE OF FILING: APPLICATION

COST:

125.00

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Wright Brothers Development XXIV, LLC		
Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Com Existence, and check are submitted to register the above refer	apany for Author, zation to Transact Business in Florida," Certificate of renced foreign limited liability company to transact business in Florida.	
Please return all correspondence concerning this matter to the	e following:	
Julie I. Kline, Esq.		
Name of Person		
Strassburger McKenna Gutnick & Gefsky		
Firm/Company		
444 Liberty Avenue, Suite 2200		
Address		
Pittsburgh, PA 15222		
City/S	State and Zip Coce	
jkline@smgglaw.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Julic I. Kline	_at (412) 586-2591	
Name of Contact Person	Area Code Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPART \$\Begin{array}{l} \Begin{array}{l} \Begin{array}{	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate	

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. Wright Brothers Development XXIV, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C," or "LLC.") 2 Pennsylvania (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1200 Sharon Road 6 1200 Sharon Road (Street Address of Principal Office) (Mailing Address) Beaver, PA 15009 Beaver, PA 15009 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agent Solutions, Inc. Name: 2894 Remington Green Ln., Stc. A Office Address: Tallahassee 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.

> Olsturman_ (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: Name: Bryan D. Wright ■ Manager □Manager Name: □Member Address: 1200 Sharon Road □Member Address: Beaver, PA 15009 □ Authorized ☐ Authorized Person Person □Other Other □Other □Other____ Name: Luke A. Wright ■ Manager □Manager Name: ____ Address: 1200 Sharon Road ☐ Member □Member Address: ____ Beaver, PA 15009 □ Authorized ☐ Authorized Person Ferson □Other Other____ ☐Other □Other____ Name: W. David Wright ■ Manager □Manager Name: Address: 1200 Sharon Road ☐ Member □Member Address: Beaver, PA 15009 □ Authorized ☐ 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. Nonindexed 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 thouthorized person Bryan D. Wright

Typed or printed name of signer

Pennsylvania Department of State

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Regarding: Wright Brothers Development XXIV, LLC

Request Type: Subsistence Certificate Issuance Date: December 01, 2023

Request No.: 026392736 File No.: 0012890486

Receipt No.: 000790038

Filing Type: Domestic Limited Liability

Company

Filing Subtype: Limited Liability Company

Initial Filing Date: February 27, 2023

Status: Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

Wright Brothers Development XXIV, LLC

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

Albert Schmidt

Secretary of the Commonwealth

Men Selm

Verify this certificate online at www.file.dos.pa.gov