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Da	ate:	04/24/2024	- 4:1 DW
		Acc#I20160000072	4: () = W
Name:	Carrollwood	HoldCo, LLC	
Document #:	-		
Order #:	15507656		
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Thank you!

COVER LETTER

TO:		ation Section n of Corporations				
SUBJE		rrollwood HoldCo, LLC				
.,.,.,.,	···	Name	of Limited Liability Co	ompany		
The enc Existen	closed "A	pplication by Foreign Limited Liability Coheck are submitted to register the above re	ompany for Authorizati ferenced foreign limited	on to Transact Business in Florida," Certificate of d liability company to transact business in Florida		
Please r	eturn all	correspondence concerning this matter to	the following:			
		Kate Semelhack				
			Name of Person			
		Best & Flanagan LLP				
			Firm/Company			
	60 South Sixth Street, Suite 2700					
Address						
		Minneapolis, MN 55402				
		Cit	y/State and Zip Code			
		csemclhack@bestlaw.com				
		E-mail address: (to be	used for future annual r	eport notification)		
For furt	ther infor	mation concerning this matter, please call	:			
	Kate S	emelhack	612 at ()	341-9708		
		Name of Contact Person	Area Code	Daytime Telephone Number		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee be Street, Suite 810		
	Please	ed is a check for the following amount: make check payable to: FLORIDA DEPA 5.00 Filing Fee \$130.00 Filing Fee Certificate of	& 🗆 \$155.00 Filir	ng Fee & 🔲 \$160.00 Filing Fee, Certificate		

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

IN COMPLANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED DABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Traine man witchle enter alternate n	ume adopted for the purpose of transacting business in Fl	orida The	alternate name must include "Limi	led Liability Company," "L L.C," or "LL"
	and adopted for the playose of transacting outsidess in v.	01100		
Delaware		3.	99-2342227	number, if applicable)
(Jurisdiction under the law of wh	nich foreign limited liability company is organized)		(FEI	number, if applicable)
April 30, 2024				
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration ine penalty) liability)	
1041 Ohio Street		6.	1041 Ohio Street	
West St. Paul , MN 55118		U.	(Mailing Address)	
		West St. Paul, MN 55118		
				202
Name and street addres	s of Florida registered agent: (P.O. Box	NOT a	icceptable)	2024 AFR
Name:	C T Corporation System			24 PH
Office Address:	1200 South Pine Island Road			<u>မှ</u> မွှ
	Plantation		33324	S

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.

/s/ David Westcott,	David Westcott	Assistant Secretary		
(Registered agent's signature)				

8. For initial index manage [up to six (6	ing purposes, list names, title or capacity and bottal]:	d addresses of the primary n	nembers/managers or persons authorized to
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: U.S. WDS, Inc.	□Manager	Name:
■Member	Address: 1041 Ohio St.	□Member	Address: 1041 Ohio St.
□Authorized	West St. Paul, MN 55118	■ Authorized	West St. Paul, MN 55118
Person	Matthew Whebbe	Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
■ Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□ Managar	Name:	□Manager	Name:
□Manager		□Member	Address:
□Member	Address:		
□Authorized		□Authorized	
Person		Person Other	□Other_
indexed individuals	Use an attachment to report more than six (6) is may be added to the index when filing you). The attachment will be im Florida Department of Stat	aged for reporting purposes only. Non- e Annual Report form.
Attached is a cer jurisdiction under the of the translator mu	tificate of existence, no more than 90 days o he law of which it is organized. (If the certifi ist be submitted)	ld, duly authenticated by the icate is in a foreign language	cofficial having custody of records in the cat translation of the certificate under oath
10. This document submitted in a docu	is executed in accordance with section 605.0 ment to the Department of State constitutes a	0203 (1) (b), Florida Statutes a third degree felony as prov	s. I am aware that any false information ided for in s.817.155, F.S.
	Matthew White		
	Signa Signa	ture of an authorized person	
	Matthew Whebbe		

Typed or printed name of signee

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CARROLLWOOD HOLDCO, 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 APRIL, A.D. 2024.

a at corp delaware pov/aut

Authentication: 203187204

Date: 04-04-24