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Secretary of State

Application to Register a Foreign Limited Liability Company (LLC)

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to https://www.fib.ca.gov/.

For Office Use Only

-FILED-

File No.: 202464713598 Date Filed: 11/20/2024

| https://www.fib.ca.gov/. | For more information, go to | | | This Space For Office Use Only | | | | |
|--|-----------------------------|-----------------------------------|----------------------|--------------------------------|-------------|----------|--|--|
| 1a. LLC Name (Enter the exact name of the LLC as listed on your attached | d Certificate of Go | ood Standing | j.) | | | | | |
| PIC Laguna Ridge, LLC | | | | | | | | |
| 1b. California Alternate Name, if Required (Only enter an alterna | te name if the LLC | C name In 1a | a not avallable in C | California.) |) | | | |
| 2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached | Certificate of Goo | d Standing.) | | | | | | |
| a. Jurisdiction (State, foreign country or place where this LLC is formed.) | | | | | | | | |
| Delav | vare | | | | | | | |
| b. Authority Statement (Do not alter Authority Statement) | | | | | | | | |
| This LLC currently has powers and privileges to conduct busined | ess in the state | e, foreign | country or plac | enter | ed in Ite | m 2a. | | |
| 3. Business Addresses (Enter the complete business addresses. Ite | ms 3a and 3b car | not be a P.0 | D. Box or "in care | of an indi | vidual or e | entity.) | | |
| a. Street Address of Principal Office - Do not enter a P.O. Box | City (no abbreviations) | | | State | Zip Code | | | |
| 27452 Calle Arroyo | San Juan Capistrano | | | CA | 92675 | | | |
| b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box | City (no abbreviations) | | | State | Zlp Code | | | |
| 27452 Calle Arroyo | San Juan Capistrano | | | CA | 92675 | | | |
| c. If the Mailing Address is the same as item 3a or 3b, check the applicable box: | _3a ∠ 3b | | | · | <u> </u> | | | |
| d. Mailing Address - if different than item 3a or 3b | City (no abbrevia | City (no abbreviations) State Zip | | | Zip Code | 9 | | |
| 4. Service of Process (Must provide either Individual OR Corporation. INDIVIDUAL — Complete Items 4a and 4b only. Must include agent's full | • | nla street ad | dress. | | <u></u> | | | |
| a. California Agent's First Name (if agent is not a corporation) | Middle Name | e Name Last Name | | | Suffix | | | |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box | City (no abbreviations) | | State | Zip Code | | | | |
| | C. | | | | | CA | | |
| CORPORATION - Complete Item 4c only. Only include the name of the | registered agent (| Corporation. | | | • | | | |

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5. Read and Sign Below (Title not required.)

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 4a or 4b

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign on behalf of the foreign LLC.

Corporation Service Company Which Will Do Business In California As CSC - Lawyers Incorporating Service

Signature

Jeffrey Pintar
Type and Print Name

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The First State

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

DELAWARE, DO HEREBY CERTIFY "PIC LAGUNA RIDGE, 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 NINETEENTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PIC LAGUNA RIDGE, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JULY, A.D. 2024.

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



Authentication: 204917896

Date: 11-19-24