LLC-5

-FILED-

For Office Use Only

B3143-7561 11/01/2024

File No.: 202464511248 Date Filed: 11/1/2024

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.ftb.ca.gov/.

| https://www.πb.ca.gov/. | | This Space For Office Use Only | | | | |
|---|----------------------------|--------------------------------|----------------|--------------|----------|--|
| 1a. LLC Name (Enter the exact name of the LLC as listed on your attack | hed Certificate of G | ood Standing.) | | | • | |
| Digital Vernon 4, LLC | | | | | | |
| 1b. California Alternate Name, If Required (Only enter an alter | mate name if the LL | C name in 1a not available | in California. | ······) | | |
| | | | | | • | |
| | | | | | | |
| 2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached | ed Certificate of Goo | od Standing.) | | | | |
| a. Jurisdiction (State, foreign country or place where this LLC is formed.) | | | | | | |
| Del | aware | | | | | |
| b. Authority Statement (Do not alter Authority Statement) | | | | | | |
| This LLC currently has powers and privileges to conduct bus | iness in the stat | e, foreign country or p | olace enter- | ed in Ite | m 2a. | |
| 3. Business Addresses (Enter the complete business addresses. | Items 3a and 3b ca | nnot be a P.O. Box or "in ca | are of an ind | ividual or e | entity.) | |
| a. Street Address of Principal Office - Do not enter a P.O. Box | City (no abbrev | City (no abbreviations) | | Zip Code | | |
| 2323 Bryan Street | Dallas | Dallas | | 75201 | | |
| b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box | ox City (no abbrev | City (no abbreviations) | | Zip Code | | |
| | | | | | | |
| c. If the Mailing Address is the same as item 3a or 3b, check the applicable box: | √ 3a | | | | | |
| d. Mailing Address - if different than item 3a or 3b City (n | | City (no abbreviations) | | Zip Code | | |
| | | | | | | |
| 4. Service of Process (Must provide either Individual OR Corporation | • | | | | | |
| INDIVIDUAL – Complete Items 4a and 4b only. Must include agent's fi a. California Agent's First Name (if agent is not a corporation) | Middle Name | Last Name Suffix | | | C. Hin | |
| 2. California Agonta Filot Natio (il agont lo not a corporation) | Middle Harre | Cast Name | | | Sullx | |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box | City (no abbrev | City (no abbreviations) | | Zip Cod | 8 | |
| | | | | | | |
| CORPORATION - Complete Item 4c only. Only include the name of the | ne registered agent | Corporation. | | <u> </u> | | |
| с. California Registered Corporate Agent's Name (if agent is a corporation) - Do | not complete Item 4a | ı or 4b | | | | |
| Corporation Service Company Which Will Do Business In Cal | ifornia As CSC - | Lawyers Incorporatin | g Service | | | |
| 5. Read and Sign Below (Title not required.) | | ····· | | | | |
| By signing, I affirm under penalty of perjury that the information behalf of the foreign LLC. | on h erein i s true | and correct and that | l am autho | rized to | sign | |
| 634 | Christo | opher Visgilio | | | | |
| Signature | Type at | Type and Print Name | | | | |

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

DELAWARE, DO HEREBY CERTIFY "DIGITAL VERNON 4, 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIGITAL VERNON 4, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF OCTOBER, A.D. 2024.

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

Authentication: 204772223

Date: 10-31-24

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