Secretary of State **Application for Registration** Foreign Limited Partnership (LP)

-FILED-

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Secretary of State		-	Fa= /	Office Use	Only		
Application for Registration				For Office Use Only -FILED-			
Foreign Limited Partnership (LP)	")						
		File No.: 202464004186		86			
		_	Date Filed: 9	/24/2024			
Foreign Certificate of Good Standing is required.							
Filing Fee - \$70.00							
Certified Copy Fee (Optional) - \$5.00	(P						
Note: Registered LPs in California may have to pay minimum \$80 California Franchise Tax Board each year. For more information,	io tax to the go to						
https://www.ftb.ca.gov/		A	bove Space Fo	r Office L	Jse Only	,	
1. Name of Foreign LP (Only enter an alternate name if the foreign	I P name in Item 1s	ls not available	in CA.)		<u> </u>		
1a. Enter the Exact Name of the Foreign LP (as ilsted on the Certificate of			e to be Used in C	California,	if required	s .	
Good Standing.)					·		
LIONHEART AI I-P, L.P.							
2. LP Jurisdiction (Ensure that the jurisdiction matches the attache	ed Certificate of Goo	d Standing.)					
Jurisdiction (State, foreign country or place where this LP is formed.)	w =						
DE	LAWARE	· · · · · · · · · · · · · · · · · · ·					
B. Business Addresses (Enter the complete business addresses	s. Items 3a and 3b c	cannot be a P.O	Box or fin care	of" an indi	vidual or	entity.)	
s. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbr	eviations)	State	Zip Code			
120 JUNIPER ROAD	BOLINAS	<i>\</i> S		CA	94924		
. Mailing Address of Principal Office, if different than Item 3a	City (no abbr	reviations)		State	Zip Coo	le	
c. Address of required office in Jurisdiction of Formation, if any	City (no abbr	City (no abbreviations)			te Zip Code		
4. Service of Process (Must provide either Individual OR Corpora	ation.)		· ·· <u> </u>	<u>.</u>	<u> </u>		
INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's	tull name and Calif	ornia street add	ress.				
. California Agent's First Name (if agent is not a corporation)	Middle Name	Middle Name Last Name				Suffi	
	<u> </u>		<u> </u>			<u>.</u>	
. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbi	City (no abbreviations)		State			
CORPORATION - Complete Item 4c only. Only include the name of	the registered east	d Companion	<u> </u>	CA	<u> </u>		
control - compete learn 40 only. Only include the name of california Registered Corporate Agent's Name (if agent is a corporation) - D				· · · · · ·			
ORPORATION SERVICE COMPANY WHICH WILL DO BUSINESS I	•		S THATODOOD	TTMC SE	.DVICE		
			<u></u>		NUL		
 General Partners (Enter the name and addresses of all the General Partner's Name 	era: Parmers. Attac	a additional pa	ges, a necessary	<u>'}</u>			
LIONHEART AI I GP, LLC							
ib. General Partner's Address	City (no abh	City (no abbreviations)		State	Zip Code		
120 JUNIPER ROAD	1	BOLINAS		CA			
					CA 37327		
. Foreign Limited Liability Limited Partnership (Check the	us box only if applic	abie)					
Check this box if the foreign limited partnership is a foreign lin	nited liability limite	ed partnership	•				
All attachments are part of this document. I declare that I are	m the person w	no signed thi	s instrument.	which is	my act	and	
leed. I further declare the information is true and correct, a	nd I am authori:	zed to sign.					
War			MANAGING N	AEMBER	OF LION	HEART	
Canada		ID LANGER	<u>` </u>	ic Geiver			
General Partner's Signature	Tur	a or Drint M					

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The First State

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

DELAWARE, DO HEREBY CERTIFY "LIONHEART AI I-P, L.P." 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 TWENTY-FOURTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIONHEART AI I-P, L.P." WAS FORMED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2024.

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



Authentication: 204474649

Date: 09-24-24