LLC-5 **Secretary of State** Application to Register a Foreign Limited **Liability Company (LLC)**

For Office Use Only

-FILED-

B3207-1482 11/20/2024

PM Received

California Secretary

File No.: 202464716885 Date Filed: 11/20/2024

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

https://www.flb.ca.gov/.	0	This Spa	This Space For Office Use Only			
1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)						
MDC PPW Phase I Holdings, LLC			, , ,			
1b. California Alternate Name, If Required (Only enter an alternate name if the LLC name in 1a not available in California.)						
2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached Certificate of Good Standing.)						
a. Jurisdiction (State, foreign country or place where this LLC is formed.)						
Delaware						
b. Authority Statement (Do not alter Authority Statement)						
This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2a.						
3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)						
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbrevi	ity (no abbreviations)			Zip Code	
11995 El Camino Real	San Diego	San Diego			92130	
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbrevi	State	Zip Code			
11995 El Camino Real	San Diego	CA	92130			
c. If the Mailing Address is the same as item 3a or 3b, check the applicable box: 2 3a 3b						
d. Mailing Address - if different than item 3a or 3b	City (no abbrevi	State	Zip Code			
4. Service of Process (Must provide either Individual OR Corporation.)						
INDIVIDUAL – Complete Items 4a and 4b only. Must include agent's full name and California street address.						
a. California Agent's First Name (if agent is not a corporation)	Middle Name Last Name		ne .		Suffix	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbrevi	abbreviations)		Zip Code		
CORPORATION - Complete Item 4c only. Only include the name of the r	egistered agent	Corporation.				
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 4a or 4b						
Corporation Service Company Which Will Do Business In California As CSC - Lawyers Incorporating Service						
5. Read and Sign Below (Title not required.)						
By signing, I affirm under penalty of perjury that the information on behalf of the foreign LLC.	herein is true	and correct and th	at I am author	rized to	sign	
(\nearrow)	Bianca Martinez					
Signature Type and Print Name						

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MDC PPW PHASE I HOLDINGS, 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 TWENTIETH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MDC PPW PHASE I HOLDINGS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2024.

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



Authentication: 204921640

Date: 11-20-24