

### **Secretary of State**

LLC-5

## 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.

Processing Fee: \$0 - The processing fee is waived for submission submitted July 1, 2022 - June 30, 2023.

Certification Fee (Optional) - \$5.00

For Office Use Only

### -FILED-

B3074-1158 10/03/2024

File No.: 202464117190 Date Filed: 10/3/2024

remains due and is not subject to the processing fee waiver. For more information, go to ftb.ca.gov.		This Space For Office Use Only			<u>.</u>
1a. LLC Name (Enter the exact name of the LLC as listed on your attached	d Certificate of G	ood Standing.)			2
5709-5789 Lone Tree Way Holdings, LLC					η Ξ
1b. California Alternate Name, If Required (Only enter an alternat	e name if the LL	C name in 1a not available	in California.)	)	<u>ק</u> ח
2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached C	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.)					
Delaw	vare				×
b. Authority Statement (Do not alter Authority Statement) This LLC currently has powers and privileges to conduct busine	ess in the stat	e, foreign country or	place enter	ed in Iten	 ը n 2a.
3. Business Addresses (Enter the complete business addresses. Iter	ms 3a and 3b ca	nnot be a P.O. Box or "in o	are of an indi	vidual or er	
a. Street Address of Principal Executive Office - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Code	
900 19th Street, NW, 8th Floor	Washingto	DC	20006		
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)  State Zip Code  CA		դ Ծ		
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations) State Zig		Zip Code		
Service of Process (Must provide either Individual OR Corporation.)  INDIVIDUAL – Complete Items 4a and 4b only. Must include agent's full re-		nia street address.	'		 Ω
a. California Agent's First Name (if agent is not a corporation)	Middle Name			Suffix K	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbrev	iations)	State CA	Zip Code	
CORPORATION - Complete Item 4c only. Only include the name of the r	registered agent	Corporation.	I		
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not	t complete Item 4	a or 4b			<u>6</u>
Corporation Service Company Which Will Do Business	In California	a As CSC - Lawyer	s Incorpor	ating Se	ervice"
5. Read and Sign Below (Title not required.)					

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.

Vikram Suryavanshi

Signature

Type or Print Name

# <u>Delaware</u>

Page 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "5709-5789 LONE TREE WAY 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 THIRD DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "5709-5789 LONE

TREE WAY HOLDINGS, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF

AUGUST, A.D. 2024.

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



Authentication: 204546601

Date: 10-03-24