

## **Secretary of State**

## Application to Register a Foreign Limited Liability Company (LLC)

LLC-5

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

Filing Fee - \$70.00

LLC-5 (REV 11/2023)

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the

For Office Use Only

## -FILED-

File No.: 202464511198 Date Filed: 11/1/2024

California Franchise Tax Board each year. For more information, go the https://www.ftb.ca.gov/.	to	This Space Fo	or Office Use Only			
1a. LLC Name (Enter the exact name of the LLC as listed on your attached	d Certificate of Go	od Standing.)				
AH LSV III E-3 Blocker, L.L.C.						
1b. California Alternate Name, If Required (Only enter an alterna	te name if the LLC	name in 1a not available in	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.)						
Delaware, United States of America						
b. Authority Statement (Do not after Authority Statement)						
This LLC currently has powers and privileges to conduct busine	ess in the stat	e, foreign country or pla	ce enter	ed in Ite	m 2a.	
3. Business Addresses (Enter the complete business addresses. Ite	ms 3a and 3b car	not be a P.O. Box or "in care	of" an indi	ividual or	entity.)	
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbrevi	obreviations)		Zip Code		
2865 Sand Hill Road, Suite 101	Menio Pari	(	CA	94025-7022		
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbrevi	ity (no abbreviations)		Zip Code		
2865 Sand Hill Road, Suite 101	Menlo Park		CA	94025-7022		
c. If the Mailing Address is the same as item 3a or 3b, check the applicable box:	<b>√</b> 3a3b					
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.	.}		<u>.</u>			
INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full		nia street address.				
a. California Agent's First Name (if agent is <b>not</b> a corporation)	Middle Name	Last Name			Suffix	
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b>	City (no abbrevi	ations)	State Zip		Zip Code	
CORPORATION – Complete Item 4c only. Only include the name of the	registered agent (	Corporation.	1			
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do no	t complete Item 4a	or 4b	<del></del>		,	
C T CORPORATION SYSTEM						
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 that I a	m author	rized to	sign	
	Scott A	aron Kupor				
Signature		d Print Name				
g	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					

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## The First State

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

DELAWARE, DO HEREBY CERTIFY "AH LSV III E-3 BLOCKER, L.L.C." 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 FIRST DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AH LSV III E-3 BLOCKER, L.L.C." WAS FORMED ON THE TWENTY-FIRST DAY OF MAY, A.D. 2024.

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



Authentication: 204779758

Date: 11-01-24