For Office Use Only

## -FILED-

B3013-8528 11/12/2024

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California

Secretary

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File No.: 202464509383 Date Filed: 11/12/2024

Foreign Certificate of Good Standing is required.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LPs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <a href="https://www.ftb.ca.gov/">https://www.ftb.ca.gov/</a>.

Above Space For Office Use Only

1. Name of Foreign LP (Only enter an alternate name if the foreign L	P name in Item 1a is not ava	ilable in CA.)			
1a. Enter the Exact Name of the Foreign LP (as listed on the Certificate of Good Standing.)	1b. Enter the Alternate	1b. Enter the Alternate Name to be Used in California, if required.			
Legalist SPV II, LP					
2. LP Jurisdiction (Ensure that the jurisdiction matches the attached	Certificate of Good Standing	j.)		<b>-</b> .	
Jurisdiction (State, foreign country or place where this LP is formed.)					
De	iawar <b>e</b>				
3. Business Addresses (Enter the complete business addresses.	Items 3a and 3b cannot 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 abbreviations)		State	Zip Code	
2700 19th St.	San Francisco		CA	94110	
b. Mailing Address of Principal Office, if different than item 3a	City (no abbreviations)		State	Zip Code	
58 W. Portal Ave., No. 747	San Francisco		CA	94127	
c. Address of required office in Jurisdiction of Formation, if any	City (no abbreviations)		State	Zip Code	
4. Service of Process (Must provide either Individual OR Corporati INDIVIDUAL – Complete Items 4a and 4b only. Must include agent's f		t address.		L	
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)		State CA	Zip Code	
CORPORATION - Complete Item 4c only. Only include the name of the		on.			
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do					
Corporation Service Company Which Will Do Busines	s In California As CS	SC - Lawyers In	corpor	ating S	Servic
5. General Partners (Enter the name and addresses of all the General	al Partners. Attach additiona	l pages, if necessary.	)		
5a. General Partner's Name  Legalist SPV GP II, LLC					
5b. General Partner's Address	City (no abbreviations)		State	Zip Code	
2700 19th St.	San Francisco		CA	9411	0
6. Foreign Limited Liability Limited Partnership (Check this	s box only if applicable)			<u></u>	
Check this box if the foreign limited partnership is a foreign limit	ted liability limited partners	ship.			
All attachments are part of this document. I declare that I am deed. Liurther declare the information is true and correct, and			which is	my act	and
1300		Brian T. Rice, Member of General Partner, Legalist SPV GP II, LLC			
Gerleral Partner's Signature	Type or Prin				

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## The First State

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

DELAWARE, DO HEREBY CERTIFY "LEGALIST SPV II, LP" 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 TWELFTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEGALIST SPV II,

LP" WAS FORMED ON THE SECOND DAY OF SEPTEMBER, A.D. 2021.

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



Authentication: 204853089

Date: 11-12-24