Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone: (503)986-2200
Fax: (503)378-4381
https://sos.oregon.gov/business/

2024 ANNUAL REPORT
Registry Number: 23117690
Date of Authority: 07/16/2004
Fee: $275
Due Date: 07/16/2024
Type: FOREIGN LIMITED LIABILITY COMPANY

PH TIMBER LLC
AGVICTUS CAPITAL MGMT LLC
3650 MANSELL RD STE 495
ALPHARETTA GA 30022

FILED: JUL 5, 2024
OREGON SECRETARY OF STATE

23117690-26443513

PH TIMBER LLC **RENANA**

Name of Foreign Limited Liability Company
PH TIMBER LLC
Jurisdiction: DELAWARE

The following information is required by statute. Please complete the entire form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

Registered Agent
C T CORPORATION SYSTEM
780 COMMERCIAL ST SE STE 100
SALEM OR 97301-3465

If the Registered Agent has changed, the new agent has consented to the appointment. Oregon street address required.

1) Type of Business

2) Principal Place of Business (Address,city,state,zip)
C/O AGVICTUS CAPITAL MGMT LLC
3650 MANSELL RD STE 495
ALPHARETTA GA 30022

3) Mailing Address (Address,city,state,zip)
AGVICTUS CAPITAL MGMT LLC
3650 MANSELL RD STE 495
ALPHARETTA GA 30022

4) ☐ **Member or** ☑ **Manager**(Name&Address)
AGVICTUS CAPITAL MGMT LLC
3650 MANSELL RD STE 495
ALPHARETTA GA 30022

5) ☐ **Member or** ☐ **Manager** (Name&Address)

Execution:
I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any members, managers, employees or agents of the limited liability company on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

6) Signature Matthew Whitley

7) Printed Name Matthew Whitley

8) Date 6-12-24

9) Phone Number 678-387-1751

Make check payable to "Corporation Division" and mail to the address above.
Note: Filing fees may be paid with a major credit card. Submit the card number and expiration date on a separate page for your protection.

ANRPF1-
06/05/24