Division of Corporations

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Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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Foreign Limited Liability Company **ADMIN TASCO LLC**

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Гехаs					
(Jurisdiction under the law of which foreign limited liability company is organized)		3. (Fld number, if applicable)			
	(Date first transacted business in Florida, it pri	or to registration) etermine penalty hability;			
7901 4th St N		7901 4th St N			
(Street Address of Principal Office)		6. (Mailing Address)			
STE 300		STE 300			
St. Petersb	urg FL 33702	St. Petersburg FL_3370)2		
			0		
'ann and exact adde	san of Florida registered populs (P.O.)	Par VOT againstable)	=		
Same and street addre	ess of Florida registered agent: (P.O.)	Box NOT acceptable)			
	Northwest Registered.		<u>.</u> =		
Name:			<u>.</u> =		
	Northwest Registered		1112 13 AM 11: 52		

Title or Capacity:	Name and Address:	Title or Capacity;		Name and Address:
☑Manager	Name: Jack Smith	☐ Manager	Name:	
☐Member	Address: 7901 4th St N STE 300	Member	Address:	
☐Authorized	St. Petersburg FL 33702	Authorized		
Person		Person		
Other	Other	Other		Other
☐Manager	Name;	☐ Manager	Name:	
☐Member	Address:	☐ Member	Address:	
Authorized		☐ Authorized		
Person		Person		
Other	Other	Other		Other 9
☐Manager	Name:	Manager	Name:	JUN 13
☐Member	Address:	☐ Member	Address; _	
☐Authorized		Authorized		<u> </u>
Person		Person		72 5 20 5
Other	Other	Other		Other
indexed individuals 9. Attached is a cer	Jse an attachment to report more than six (6). To may be added to the index when filing your Fl tificate of existence, no more than 90 days old, he law of which it is organized. (If the certificat	he attachment will be in orida Department of Sta duly authenticated by ti	maged for repo ate Annual Rep he official havii	rting purposes only. No ort form. ig custody of records i
	is executed in accordance with section 605.020.	3 (1) (b). Florida Statut	es. I am aware t	hat any false information
	ment to the Department of State constitutes a th			

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jose A. Esparza Deputy Secretary of State

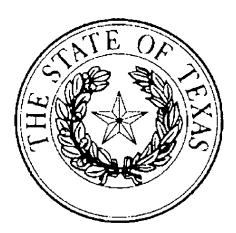
Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for ADMIN TASCO LLC (file number 803339759), a Domestic Limited Liability Company (LLC), was filed in this office on June 10, 2019.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 12, 2019.



Phone: (512) 463-5555 Prepared by: SOS-WEB Jose A. Esparza Deputy Secretary of State