

mao000004/41

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

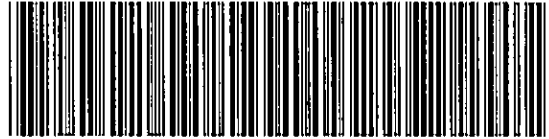
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04/06/20--01025--024 **76.75

04/29/20--01020--014 **51.25

APR 30 2020

APR 30 2020

FILED

APR 30 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020/04/13 12:49

April 13, 2020

MITCHUM OWEN
P.O. BOX 199
HARBOR CITY, CA 90710

SUBJECT: MILO DIGITAL, LLC
Ref. Number: W20000036841

We have received your document for MILO DIGITAL, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a fee of \$46.25 due.

The document you sent in is for a Foreign Corporation. You need to send in the Foreign LLC document.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 720A00007795

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MILO DIGITAL, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. CALIFORNIA 3. 300783666
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1-27-2020
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1611 254TH ST. 6. PO BOX 199
(Street Address of Principal Office) (Mailing Address)

HARBOR CITY, CA 90710

HARBOR CITY, CA 90710

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: REGISTERED AGENTS, INC
~~BEHRENDT~~

Office Address: 7901 4TH ST N, STE 300

ST. PETERSBURG, Florida 33702
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Bill Hume

(Registered agent's signature)

FILED
APR 28 2020
P 2 28
CLERK OF CIRCUIT COURT
HARBOR CITY, FL

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>MITCHUM OWEN</u>	☐ Manager	Name: _____
☐ Member	Address: <u>PO Box 199</u>	☐ Member	Address: _____
☐ Authorized	<u>HARBOR CITY, CA 90710</u>	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Mitchum Owen
Signature of an authorized person

MITCHUM OWEN
Typed or printed name of signee

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: MILO DIGITAL, LLC

FILE NUMBER: 200931410269
FORMATION DATE: 11/05/2009
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 18, 2020.

ALEX PADILLA
Secretary of State