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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: D.B. Marlin Adjustin	a Solutions, LLC		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
Linetta D. Bell			
Name of Person			
D. 73. Marlin Adjusting Solutions, LLC			
11 N. Water Street Street	on:te 1074		
Mobile, AL 36le City/State and Zip	O2 Code		
hre do marlin adjusting solutions. Con E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person Area	Code Daytime Telephone Number		
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division The Cen 2415 N.	dress: tion Section of Corporations tre of Tallahassee Monroe Street, Suite 810 see, FL 32303		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\Boxed{\text{S125.00 Filing Fee}} \Boxed{\text{S130.00 Filing Fee}} \Boxed{\text{S155.00 Filing Fee}} \Boxed{\text{S160.00 Filing Fee}} \Boxed{\text{S160.00 Filing Fee}} \Boxed{\text{Certificate}} \text{Occupations} \text{Certified Copy} \text{Occupations} \text{Occupations} \Boxed{\text{Certified Copy}} \text{Occupations} \text{Certified Copy}			

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

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. De Marlin Adjusting Sc (Name of Foreign Limited Liability Company; must include "Limited Liability Company Limited Liability Limited Liability Limited Liability	
2. (Jurisdiction under the law of which foreign limited liability company is organized)	n Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 3. 83-2733/59 (FEI number, if applicable)
4	to registration) ermine penalty liability) 6. N. Water Street
Suite 1074 Mobile, AL 3leboz	Suite 1074 Mobile, AL 36602
7. Name and street address of Florida registered agent: (P.O. Bo	21
Office Address: 333SE 2nd Ave	Ste 2000 Ste 2000 Florida 33131 (Zip code)
designated in this application, I hereby accept the appointment	of process for the above stated limited liability company at the place t us registered agent and agree to act in this capacity. I further agree over and complete performance of my duties, and I am familiar with

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]: Title or Capacity: Title or Capacity: Name and Address: **⊠**Manager □Manager □Member □Member □ Authorized □ Authorized Person Person Stother_(ED rations Nor Dother □Other Name: _____ □Manager Name: □Manager Address: ____ □Member Address: _____ □Member □Authorized □ Authorized Person Person □Other____ □Other____ □Other □Other Name: ______ □Manager Name: □ Manager Address: _____ Address: □Member □Member □ 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. Nonindexed 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.

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that DB MARLIN ADJUSTING SOLUTIONS LLC was formed in Mobile County, Alabama on May 30, 2018. The Alabama Entity Identification number for this entity is 520-724. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

07/22/2021

Date

X 2. Merill

John H. Merrill

Secretary of State