

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Webstruction LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Flor

Please return all correspondence concerning this matter to the following:

Tomas Bulicek
Name of Person
Webstruction LLC
Firm/Company
77 n main st apt3
Address
Webster MA 01570
City/State and Zip Code
Tom.bulicek@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tomas Bulicek 914 3290915
Name of Contact Person at (Area Code) Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

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

WebstructionFL 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. MA (Jurisdiction under the law of which foreign limited liability company is organized)
3. 882389387 (FEI number, if applicable)

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

5. 21 green st apt2r (Street Address of Principal Office)
Dudley
MA 01571
6. 77 n main st apt3 (Mailing Address)
Webster
MA 01570

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: JORDAN DASILVA
Office Address: 822 W CYPRESS RD
POMPANO BEACH, Florida 33060
(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.

J. Dasilva
(Registered agent's signature)

2023 JAN 30 PM 3:01
JAN 30 2023

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

Title or Capacity: Name and Address:
 Manager Name: Tomas Bulicek
 Member Address: 77 n main st apt3
 Authorized Webster
Person MA 01570
 Other _____ Other _____

Title or Capacity: Name and Address:
 Manager Name: Jiri Volnicky
 Member Address: 77 n main st apt3
 Authorized Webster
Person MA 01570
 Other _____ Other _____

Manager Name: Jakub Derner
 Member Address: 21 green st apt 2R
 Authorized Dudley
Person MA 01571
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
Person _____
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Not 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 jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under 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.



Signature of an authorized person

TOMAS BULICEK

Typed or printed name of signee



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

Date: December 29, 2022

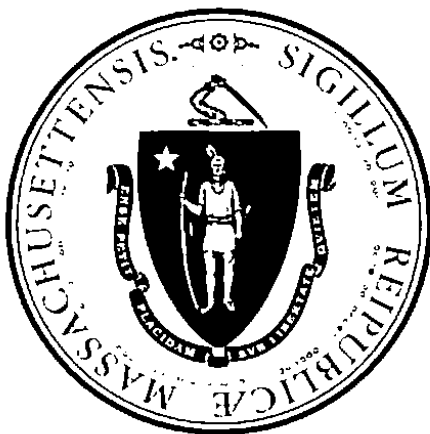
To Whom It May Concern :

I hereby certify that a certificate of organization of Limited Liability Company was filed
in this office by

WEBSTRUCTION LLC

in accordance with the provisions of Massachusetts General Laws, Chapter 156C, on
June 07, 2022.

I further certify that said Limited Liability Company has not filed a Certificate of Cancellation;
that said Limited Liability Company has not been administratively dissolved; and that, so far as
appears of record, said Limited Liability Company has legal existence.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

Certificate Number: 22120599130

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: bod