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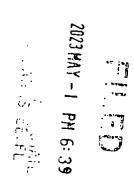
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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COVER LETTER

BJECT:	Amigos, LLC		
_	Nam	e of Limited Liability Company	
		Company for Authorization to Transact Business in Florida," Certificat referenced foreign limited liability company to transact business in Flo	
ase return a	all correspondence concerning this matter t	o the following:	
	Cyndi Sater		
		Name of Person	
	Amigos, LLC		
	Firm/Company		
	2424 6th Ave		
	Address		
	Greeley, CO 80631		
	C	ity/State and Zip Code	
	cyndi.sater@satertools.com		
	E-mail address: (to be	c used for future annual report notification)	
r further inf	ormation concerning this matter, please ca	li:	
Cyndi Sater		970 690-6869	
	Name of Contact Person	at () Area Code Daytime Telephone Number	
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

APPLICATION BY FOREIGN LIMITED LEABILITY COMPANY FOR ALTHORIZATION TO TRANSACT RESINESS IN FLORIDA

NEONITHNO STREET ON STORESTORIES STARTEN DIE FOLLORING IN SCHMITTE IO REGISTER CLURERIN TIMITEELINGE GERTEN DEUTSTERN NEUTSENNEN IN DER STALL OF GERROO

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2424 1th Ave		2424 6th Ase	S h	l PH	, apropri
(recles + O 5063) = -		(ireles 1 O SUB) !		 3-1:	. 2.2

7. Some and street address of Honda registered agent. (P.O. Box. SOI acceptable)

m. Denice Ann Davila

office address 1107 Urne Ct.

Kissimmee 1140 3:1759

Registered agent's acceptance;

Hasing 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 staticies 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.

- L. c. (-/ -) (...

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:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Cyndi Sater	□Manager	Name: Merced Terrazas
■Member	Address: 2424 6th Ave	■Member	Address: 2424 6th Ave
□Authorized	Greeley, CO 80631	□Authorized	Greeley, CO 80631
Person		Person	
□ Other	Other	Other	Other
□Manager	Name: Scott Walter	□Manager	Name:
■Member	Address: 2424 6th Ave	□Member	Address:
□Authorized	Greeley, CO 80631	□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized	A	□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.

Lunet Pot	
	Signature of an authorized person
Cyndi Sater	
	Exped or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Amigos, LLC

is a

Limited Liability Company

formed or registered on 04/26/2022 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20221431460.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/16/2023 that have been posted, and by documents delivered to this office electronically through 02/21/2023 @ 16:50:29.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/21/2023 @ 16:50:29 in accordance with applicable law. This certificate is assigned Confirmation Number 14717006

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Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.coloradosos.gov/biz/CertificateSearchCriteria.do/entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, https://www.coloradosos.gov.click."Businesses, trademarks, trade names." and select "Frequently Asked Questions."



March 18, 2023

CYNDI SATER 2424 6TH AVE GREELEY, CO 80631 US

SUBJECT: AMIGOS GREELY, LLC Ref. Number: W23000037135

We have received your document for AMIGOS GREELY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 823A00006299

