

M23000009203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 JUL 17 AM 7:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2023 JUL 17 PM 4:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 17 2023

Stubbley

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: I20210000160: \$130.00

Authorization Signature: Jan Fuller :

SIMPLE FOUNDRY LLC

BUSINESS NAME _____ DOCUMENT # _____

Certified Copy
 Certificate of Status

NEW FILINGS

- Profit Corp
- Not for Profit
- Limited Liability
- Domestication
- Other
- CORP
- LLLP

AMMENDMENTS

- Amendment
- Resignation of R.A. Officer/Director
- Change of Registered Agent
- Revocation of Dissolution
- Merger
- Articles of Conversion
- Amended and restated Articles
- Statement of Authority

OTHER FILINGS

- Annual Report
- Fictitious Name
- APOSTILLE
- Country

REGISTRATION/QUALIFICATIONS

- Foreign filing**
- Qualification for LLP
- Reinstatement
- Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations
Simple Foundry LLC

SUBJECT: Name of Limited Liability Company

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:

Daniel Morin
Name of Person
Simple Foundry LLC
Firm/Company
60 Backbone Rd
Address
Sewickley, PA 15143
City/State and Zip Code
dan@simplefoundry.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Morin 814 490-5910
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:

Simple Foundry LLC

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

Simple Foundry 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.")

Delaware

46-1248446

2. _____
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

July 17th, 2023

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

60 Backbone Rd.

60 Backbone Rd.

5. _____
(Street Address of Principal Office)

Sewickley, PA 15143

6. _____
(Mailing Address)

Sewickley, PA 15143

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

Name: InCorp Services, Inc.

Office Address: 3458 Lakeshore Drive

Tallahassee _____ 32312
_____, Florida _____
(City) (Zip code)

2023 JUL 17 AM 7:01
SECRETARY OF STATE
TALLAHASSEE, FL 09101

APPROVED
AND
FILED

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.

See Attached Document

(Registered agent's signature)

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:**
 Manager Name: Daniel R. Morin
 Member Address: 60 Backbone Rd.
 Authorized Sewickley, PA 15143
 Person
 Other _____ Other _____

Title or Capacity: **Name and Address:**
 Manager Name: Jeffrey M. Morin
 Member Address: 711 Crescent Pkwy
 Authorized Westfield, NJ 07090
 Person
 Other _____ Other _____

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

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

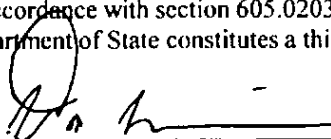
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person
 Other _____ Other _____

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. 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.



 Signature of an authorized person

Daniel R. Morin

 Typed or printed name of signee



3773 Howard Hughes Parkway Suite 500S
Las Vegas, NV 89169-6014

Phone 702.866.2500
Toll-Free 800.2.INCORP (1-800-246-2677)
Fax 702.866.2689

www.incorp.com

07/17/2023

Corporations Division
Florida Department of State
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To Whom It May Concern:

InCorp Services, Inc., an authorized Corporate Registered Agent in Florida, whose office
is located at

3458 Lakeshore Drive, Tallahassee, FL 32312
herein consents to act as Registered Agent for

Simple Foundry LLC

Having been named as registered agent and to accept service of process for the above
stated corporation at the place designated in this certificate, 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 relating to the proper and complete
performance of my duties, and I am familiar with and accept the obligations of my
position as registered agent as provided for in Chapter 605, F.S.

If you have any questions, please contact me at (800) 246-2677 from 8:00 a.m. to 5:00
p.m. PST.

Sincerely,

A handwritten signature in black ink, appearing to read "Louise Breytenbach", written over a horizontal line.

Louise Breytenbach on behalf of InCorp Services, Inc.

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIMPLE FOUNDRY LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JULY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIMPLE FOUNDRY LLC" WAS FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.




Jeffrey W. Bullock, Secretary of State

5230886 8300

SR# 20232982843

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203734999

Date: 07-13-23