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PICK-UP	WAIT	MAIL
(F	Business Entity Name)	
10	Justice Secretary Trainie,	
(C	Document Number)	
Certified Copies	Certificates of	of Status
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Special Instructions to Fi	ling Officer:	
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Office Use Only



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MIG 1 7 2023 K. Brumbley



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	08/17/2023	
	Jennifer	
Referenc	e #: <b>#2095084</b>	
		SIRALUS LLC
<b>⊘</b> Ar	ticles of Incorporation/Authoriza	ation to Transact Business
☐ An	nendment	
☐ Ch	nange of Agent	
∏ Re	einstatement	
□ Co	onversion	
	erger	
☐ Dis	ssolution/Withdrawal	
☐ Fic	ctitious Name	
<b>✓</b> Ot	herUpon filin	g please provide a certified copy
Authorize Signature	ed Amount: 155.00	

F: +852.2682.9790

## **COVER LETTER**

SUBJECT:		Giralus LLC				
SUBJECT.		ne of Limited Liability Company				
		Company for Authorization to Transact Business in Florida." Certificate referenced foreign limited liability company to transact business in Flori				
Please return	all correspondence concerning this matter t	to the following:				
		Robert M. Caine				
		Name of Person				
		Baker Botts L.L.P.				
		Firm/Company				
		910 Louisiana Street				
		Address				
		Houston, TX 77002				
		City/State and Zip Code				
		aine@bakerbotts.com				
	E-mail address: (to be	e used for future annual report notification)				
For further in:	formation concerning this matter, please ca	di:				
	Griffith Allen Kundahl	720 295-0802				
	Name of Contact Person	Area Code Daytime Telephone Number				
	ling Address:	Street Address:				
_	istration Section	Registration Section				
	ision of Corporations	Division of Corporations				
	. Box 6327	The Centre of Tallahassee				
I all	ahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Pleas	osed is a check for the following amount: se make check payable to: FLORIDA DEF 125.00 Filing Fee  \$130.00 Filing Fe Certificate of	ee & 🔳 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate				

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. (Name of Foreign I.	Giralus Imited Liability Company; must include "Limit	LLC	any,""L.L.C.,	" or "LLC.")			_
_			·				
(If name unavailable, enter alternate na	une adopted for the purpose of transacting business in h	lorida. The alternati	name must inch	ude "Limited Liabili	ity Company," "	L.L.C," a	"Ll.C.")
2	Delaware  [Jurisdiction under the law of which foreign limited liability company is organized)			93-1760003 (FEI number, if applicable)			
(Jurisdiction under the law of wh	ich foreign limited liability company is organized)			(FEI number, i	f applicable)		
·+	(Date first transacted business in Florida, if prior it (See sections 605,0904 & 605,0905, F.S. to determ	registration.) nine penalty liability	)		_		
1800 Wazee Street, Suite 335			1800 \	Wazee Street,			
5. (Street Address of Principal Office)	\(\frac{1}{2}\)	U	Mailing Address	)			_
Denver, CO 80202			Γ	Denver, CO 80	202	2	
	<del></del>				- - - - - - - - - - - - - -	023 AU	ー エ
7. Name and street address	of Florida registered agent: (P.O. Bo	x <u>NOT</u> accept	able)			617 PM	AND AND FILED
Name:	Cogency Global Inc.		_		2100 3131	6: 35	<b>\</b>
Office Address:	115 North Calhoun St., Sui	te 4	_		•	-	
	Tallahassee		_ , Florida _	32301			
	(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.

Cllis Johnston Ellie Johnston, Assistant Secretary
(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: Title or Capacity: Name and Address: Griffith Allen Kundahl Ki Ingersol ■ Manager ■ Manager Address: 1800 Wazee Street, Suite 335 1800 Wazee Street, Suite 335 □Member Address: □ Member Denver, CO 80202 Denver, CO 80202 □Authorized □ Authorized Person Person □Other\_\_\_\_ □Other Other\_\_\_\_ □Other Jorge Rios **■**Manager Name: □ Manager Address: \_ 1800 Wazee Street, Suite 335 ☐ Member ☐ Member Address: Denver, CO 80202 □ Authorized □ Authorized Person Person □Other □Other\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_ Name: □Manager Name: □Manager □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. 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. /s/ Griffith Allen Kundahl Signature of an authorized person

Griffith Allen Kundahl

Typed or printed name of signee

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GIRALUS 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 SIXTEENTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GIRALUS LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D. 2022.

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

ANYS OF THE PARTY OF THE PARTY

7150294 8300

Authentication: 203982529

Date: 08-16-23