# M23000013273

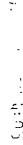
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Certified copies Certificates of Status				
Special Instructions to Filing Officer:				

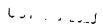
Office Use Only



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### COVER LETTER

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TO:

Registration Section

UBJECT:	Name of Limited Liability Company				
he enclosed "A xistence, and o	Application by Foreign Limited Liability Coheck are submitted to register the above r	Company for Authorization to Transact Business in Florida," Certificate of the Company to transact business in Florida in Florida.			
lease return al	I correspondence concerning this matter to	the following:			
	Shane McGreevy				
	-	Name of Person			
	Trajan Wealth				
	Firm/Company				
	7702 E. Doubletree Ranch Rd. Sutie 10	00			
		Address			
	Scottsdale, AZ 85258				
	C	ity/State and Zip Code			
	Shane@trajanwealth.com				
	E-mail address: (to be	used for future annual report notification)			
or further info	ormation concerning this matter, please cal	II:			
Judith Maldonado		480 534-8605 at ()			
	Name of Contact Person	Area Code Daytime Telephone Number			
Mailing Address: Registration Section		Street Address: 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			
	sed is a check for the following amount:	AADTSIENT ME CTATE			
	e make check payable to: FLORIDA DEF 25.00 Filing Fee S130.00 Filing Fe Certificate of	e & 🔲 \$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 (65,000), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Trajan Wealth L. E. C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (II name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name mean include "Limited Liability Company," "LLC," or "L State of Arizon 45-2884769 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) Date first transacted business in Florida, if prior to registration 1 (See sections 605,0904 & 605,0905, E.S. to determine penalty liability) 7702 E. Doubletree Ranch Rd. Suite 100 5. (Street Address of Principal Office) Scottsdale AZ 85258 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Chris Brefeld Name: 4830 W. Kennedy Blvd. Office Address: Tampa 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.

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: Jeff Junior	□Manager	Name: Brenda Junior
<b>≘</b> Member	Address: Proposition	■Member	Address: 7702 E. Doubletree Ranch Rd.
□Authorized	Suite 100	□Authorized	Suite 100
Person	Scottsdale, AZ 85258	Person	Scottsdale, AZ 85258
⊡Other	Other	Other	
■Manager	Name: Ruben Angulo	□Manager	Name: Chris Brefeld
□Member	Address: 3567 E. Sunrise Dr. Suite 133	□Member	Address: 4830 W. Kennedy Blvd.
□Authorized	Tucson, AZ 85718	■Authorized	Tampa, FL 33607
Person		Person	
Other	Other	□Other	Other
⊡Manager	Name:	□Manager	Name:
□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. 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





# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

### CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

### TRAJAN WEALTH L.L.C.

ACC file number: 1.16469139

was incorporated under the laws of the State of Arizona on 12/15/2010, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 09/21/2023



Douglas R. Clark, Executive Director



