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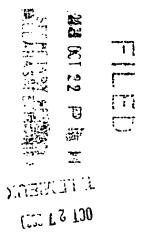
(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	





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COVER LETTER

TO:	Registration Secti- Division of Corpo				
SUBJ	ECT:	LTDC II	۷C.		
	-	Name of corporation	m - mus	t include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence,"	n by Foreign Corporation fo or "Certificate of Good State corporation to transact busin	anding" :	and check are sub	
Please	return all correspon	dence concerning this matt	er to the	following:	
		J. Michael	O'Donne	II	
		Name o	of Person	,, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	
		Steptoe & J	lohnson F	LLC	
		Firm/Co			
		1780 Hughe	es Landin	g Blvd., #750	
			iress	•	
		The Woodla	nde Tav:	s_77380	
		City/State			
		fichter@v	wt.net		
		E-mail address: (to be used	l for futu	ire annual report n	otification)
For fu	rther information co	ncerning this matter, please	call:		
.I Mi	chael O'Donnell	at (281)	203-5771	
9. 11.	Name of Person	Area Co	ide /	Daytime Teleph	none Number
	STREET/COUR Registration Section Division of Corpo The Centre of Tall 2415 N. Monroe S Tallahassee, FL 3	on rations ahassee street, Suite 810		MAILING A Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Please): FLORIĎA DEPARTMEN	☐ \$78.7	TATE 75 Filing Fee & fied Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

<u>LTDC INC.</u> (Enter name of co	orporation: must include "INCORPORATED	" "COMPANY " "CORPORATIO	
"Inc.," "Co.," "Cd	rp," "Inc," "Co," or "Corp.")	. Commerce Controllerio	····
/If transcorpagation	bla in Plorido Saturaltamento		
	ble in Florida, enter alternate corporate name		
Texas	under the law of which it is incorporated)	90-1155804	
(State or country	under the law of which it is incorporated)	(FEI number, if ap	pplicable)
5/01/2014			
(Date o	of incorporation)	(Date of duration, if other	than perpetual)
10/09/2020			
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liabil	ity)
14 Highclere Pa	ark Drive, Spring, Texas 77379-7275		
-		, ————————————————————————————————————	
	(Principal off	ice <u>street</u> address)	
	(Principal off	ice <u>street</u> address)	
		ice <u>street</u> address) g address, if different)	
Name and street	(Current mailir	ng address, if different)	
	(Current mailin address of Florida registered agent: (P.C	ng address, if different)	第46 展
Name and street Name:	(Current mailin address of Florida registered agent: (P.C C T Corporation System	ng address, if different)	
Name:	(Current mailin address of Florida registered agent: (P.C C T Corporation System	ng address, if different)	· · · · · · · · · · · · · · · · · · ·
Name:	(Current mailing address of Florida registered agent: (P.C.C.C.C.T.Corporation System 1200 S. Pine Island Road	ng address, if different) D. Box <u>NOT</u> acceptable)	8 130
Name:	(Current mailin address of Florida registered agent: (P.C C T Corporation System 1200 S. Pine Island Road Plantation	ng address, if different) D. Box NOT acceptable) Florida 33324	8 5
Name: fice Address:	(Current mailing address of Florida registered agent: (P.C.C.C.T. Corporation System 1200 S. Pine Island Road Plantation (City)	ng address, if different) D. Box <u>NOT</u> acceptable)	8 130
Name: fice Address: Registered agen	(Current mailing address of Florida registered agent: (P.C. C. T. Corporation System 1200 S. Pine Island Road Plantation (City)	ng address, if different) D. Box NOT_acceptable) , Florida 33324 (Zip code)	80122 P
Name: fice Address; Registered agen	(Current mailing address of Florida registered agent: (P.C. C.T. Corporation System 1200 S. Pine Island Road Plantation (City) t's acceptance: It as registered agent and to accept services	ng address, if different) D. Box NOT_acceptable) , Florida 33324 (Zip code)	CC 22 P
Name: ice Address; Registered agen ing been named gnated in this a	(Current mailing address of Florida registered agent: (P.C. C.T. Corporation System 1200 S. Pine Island Road Plantation (City) t's acceptance: If as registered agent and to accept service optication, I hereby accept the appoints	ng address, if different) D. Box NOT_acceptable) , Florida 33324 (Zip code) See of process for the above stated agent as registered agent and agent	corporation at the pla
Name: ice Address: Registered agen ving been named ignated in this a ther agree to con	(Current mailing address of Florida registered agent: (P.C. C.T. Corporation System 1200 S. Pine Island Road Plantation (City) t's acceptance: I as registered agent and to accept service optication, I hereby accept the appointmently with the provisions of all statutes re-	ng address, if different) D. Box NOT_acceptable) , Florida 33324 (Zip code) The of process for the above stated agent as registered agent and agreed agrees to the proper and complete.	corporation at the pla
Name: fice Address: Registered agen wing been named ignated in this a ther agree to con	(Current mailing address of Florida registered agent: (P.C. C.T. Corporation System 1200 S. Pine Island Road Plantation (City) t's acceptance: If as registered agent and to accept service optication, I hereby accept the appoints	ng address, if different) D. Box NOT acceptable) Florida 33324 (Zip code) The above stated agent and agreelative to the proper and complete sition as registered agent.	corporation at the pla
Name: fice Address: Registered agen wing been named ignated in this a ther agree to con	(Current mailing address of Florida registered agent: (P.C. C.T. Corporation System 1200 S. Pine Island Road Plantation (City) t's acceptance: I as registered agent and to accept service optication, I hereby accept the appointmently with the provisions of all statutes re-	ng address, if different) D. Box NOT_acceptable) , Florida 33324 (Zip code) The of process for the above stated agent as registered agent and agreed agrees to the proper and complete.	corporation at the place to act in this capacity e performance of my a

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

.

□ Chairman	Name: Thomas Fichter	□Chairman	Name:		
□ Vice Chairman	Address: 14 Highelere Park Dr. Spring, TX 77379-7275	□Vice Chairman	Address:	Address:	
(XDirector (sole)		□Director			
ĽXPresident		□President			
□Vice President		□Vice President	·-		
□Secretary	□Treasurer	☐Secretary		☐ Treasurer	
©Other <u>Chief Ex</u>	ecutive Officer Other	□Other		Other	
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□Secretary		□Treasurer	
□Other	Other	□Other		□ Other	
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President	· 	□President			
☐ Vice President		□Vice President			
□Secretary	□Treasurer	□Secretary		□Treasurer	
□Other	☐Other	□Other		□Other	
Important Notice: Undividuals may be	ise an attachment to report more than six (6). The attac added to the index when fifting your Florida Departmen	nt of State Annual Re	port form.		
12	Signature of Director of	Officer	19/201	v	
The officer or direction is aware that falls, 817,155, F.S.	tor signing this document (and who is listed in number lise information submitted in a document to the Depart	11 above) affirms th	at the facts stated	I herein are true and that he or	
13	Thomas Fichter				
	(Typed or printed name and capacity of perso	n signing application)		

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for LTDC Inc. (file number 801981830), a Domestic For-Profit Corporation, was filed in this office on May 01, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 07, 2020.



Ruth R. Hughs Secretary of State

Dial: 7-1-1 for Relay Services Document: 1000430260002

Phone: (512) 463-5555 Prepared by: SOS-WEB