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#### COVER LETTER

TO:

Registration Section

Hyper Ops LLC  BJECT:	<del></del>		
Name	e of Limited Liability Company		
enclosed "Application by Foreign Limited Liability ( stence, and check are submitted to register the above)	Company for Authorization to Transact Business in Florida," Certifica referenced foreign limited liability company to transact business in Florida.		
se return all correspondence concerning this matter to	o the following:		
Kristen Blacker			
	Name of Person		
Hyper Ops LLC			
	Firm/Company		
3601 S. Congress Ave. Ste. C-200			
	Address		
Austin TX 78704			
C	City/State and Zip Code		
kblacker@restore.com			
E-mail address: (to be	e used for future annual report notification)		
further information concerning this matter, please cal	II:		
Kristen Blacker	408 834-3801		
Name of Contact Person	at () Area Code Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations		
Tallahassee, FL 32314	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 DEP.  \$\Boxed{\Boxesia} \$125.00 \text{ Filing Fee} \Boxed{\Boxesia} \$130.00 \text{ Filing Fee} \text{Certificate o}	e & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate		

### 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.

orporation; must include "INCORPORATED," orp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION	<u>;;"</u>
able in Florida, enter alternate corporate name a	adopted for the purpose of transacting	g business in Florida)
•	(FEI number, if app	plicable)
of incorporation)	(Date of duration, if other than perpetual)	
(SEE SECTIONS 607.1501 & 607.15 Ave. Ste. C-200 Austin, TX 78704	02, F.S., to determine penalty liabilit	y)
(Current mailing	g address, if different)	<del></del>
et address of Florida registered agent: (P.O. Registered Agents Inc. 7901 4th St N STE 300	). Box <u>NOT</u> acceptable)	2022 FEB 28 AM Secretary of Tallamassee. F
St. Petersburg	Florida 33702	
(City)	(Zip code)	7: 40 3:14TE ORIDA
	orporation; must include "INCORPORATED," orp." "Inc." "Co." or "Corp.")  able in Florida, enter alternate corporate name a substitution of incorporation [SEE SECTIONS 607.1501 & 607.15]  Ave. Ste. C-200 Austin, TX 78704  (Principal official registered agent: (P.O. Registered Agents Inc. 7901 4th St N STE 300  St. Petersburg	orporation: must include "INCORPORATED," "COMPANY," "CORPORATION orp." "Inc." "Co." or "Corp.")  able in Florida, enter alternate corporate name adopted for the purpose of transacting y under the law of which it is incorporated)  (PEI number, if apply 5.  (Date of duration, if other to the purpose of transacting of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability Ave. Ste. C-200 Austin, TX 78704  (Principal office street address)  (Current mailing address, if different)  et address of Florida registered agent: (P.O. Box NOT acceptable)  Registered Agents Inc.  7901 4th St N STE 300  St. Petersburg  Florida

#### 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Registered Agents Inc.
Bill Havre - Assistant Secretary

(Registered agent's signature)

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.

A. DIRECTORS				
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address: 3601 S. Congress Ave. Ste. C-200	□Vice Chairman	Address:	
■Director	Austin, TX 78704	□Director		
□President		□President		
□Vice Presidem		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	□Other	□Other		□Other
□Chairman	Name:	☐ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		Director	<u> </u>	
□President		□President		
□Vice President		□Vice President		
□ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		□Other
□ Chairman	Name:	□ Chairman	Name:	<del>-</del>
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		<del></del>
□Vice President		□Vice President	_	<u>_</u>
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
Other	Other	□Other		□Other
individuals may be	Jse an attachment to report more than six (6). The added to the index when filing your Florida Department of the complete of t	rtment of State Annual Re	I for reporting port form.	ourposes only. Non-indexed
	Signature of Direct	or or Officer		
she is aware that fa. s.817.155, F.S.	tor signing this document (and who is listed in nullse information submitted in a document to the De	mber 11 above) affirms the partment of State constitu	at the facts state tes a third degre	ed herein are true and that he o ee felony as provided for in
13. Jim Donnelly	, Director			

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 Hyper Ops LLC (file number 803863868), a Domestic Limited Liability Company (LLC), was filed in this office on December 16, 2020.

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 February 22, 2022.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State