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T. LEMIEUX

COVER LETTER

Div	gistration Section vision of Corporations	
SUBJECT	: FRATERNAL ORDER OF BAR	TENDERS LLC
	Name of corporation - must in	nclude suffix
Dear Sir or	Madam:	
"Certificate	ed "Application by Foreign Corporation for Authoriza of Existence," or "Certificate of Good Standing" and enced foreign corporation to transact business in Flor	d check are submitted to register the
Please return	n all correspondence concerning this matter to the fo	llowing:
KENN	JETH R. STEWART	
	Name of Person	
FRATE	ERNAL ORDER OF BARTENDERS	LLC
	Firm/Company	
307	ELIZABETH ST. APT 1	
	Address	
Key 1	WEST, FL 33046 City/State and Zip co	
	City/State and Zip co	ode
KENN	City/State and Zip co	
	E-mail address: (to be used for future	annual report notification)
For further i	information concerning this matter, please call:	
	_	,
	STEWART at (602)	025-2905 Daytime Telephone Number
Nai	me of Person Area Code	Daytime Telephone Number
Reg Div The 241	REET/COURIER ADDRESS: gistration Section vision of Corporations c Centre of Tallahassee 5 N. Monroe Street, Suite 810 lahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Plouse make	Ç C	TE Filing Fee & \$87.50 Filing Fee, ed Copy 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.

1.	FRATERNAL URDER OF BARTENDERS LLC						
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc.," "Co,," or "Corp.")						
	FRATERNAL ORDER OF BARTENDERS - FL	assia Plantiday					
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busing	ess in riorida)					
2.	. AZIZONA 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)	- \					
	51 65 C	;)					
4.	5. PERPETUAL (Date of incorporation) (Date of duration, if other than pe	emosta (n.1.)					
	(Date of duration, if other than pe	(petuar)					
6.	6. (Date first transacted business in Florida, if prior to registration)						
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)						
7.	307 ELIZABETH ST APT 1, Key West, FL 33040						
	(Principal office street address)						
	(Current mailing address, if different)	7-20 6-20 7-3					
		(,					
8.	. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	-					
	Name: HEATH MURPHY	-n (
О	Office Address: 5622 DENTRAL AVE.	3					
	ST. PETERSBURG Florida 33707	တ္ ယ မာ					
	(City) (Zip code)	. •					

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 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: KENNETH 2 SPEWNUT	□Chairman	Name:						
□Vice Chairman	Address: 307 EHZABETH ST APT	□Vice Chairman	Address:						
□Director	<u>KEY WEST</u> , FL 33040	□Director							
President		□President							
□Vice President		□Vice President							
□Secretary	Treasurer	☐ Secretary		□Treasurer					
□Other	Other	Other		□Other					
□Chairman	Name:	□Chairman	Name:						
□Vice Chairman	Address:	□Vice Chairman							
□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: 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. 12. Signature of Director or Officer									

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. KENNETI R STEWART





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

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

Fraternal Order Of Bartenders L.L.C.

ACC file number: 23166839

was incorporated under the laws of the State of Arizona on 01/05/2021, 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: 07/03/2023

Douglas R. Clark, Executive Director

Angle K.Clark



