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DEPARTMENT OF STATE

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COVER LETTER

SUBJECT: Fuzzy Rides LL	Name of Limited Liability Company	
	iability Company for Authorization to Transact Business in e above referenced foreign limited liability company to tran	
Please return all correspondence concerning this	matter to the following:	
Hien Do		
	Name of Person	
Fuzzy Rides L	.LC	
	Firm/Company	
3010 Grassy L	_ake Drive	215
	Address	≥ 1
Baton Rouge,	Louisiana 70816	20 1 Paris
	City/State and Zip Code	TIGO TO TO
Hiendo85@ho	tmail.com	
E-mail addro	ess: (to be used for future annual report notification)	三
For further information concerning this matter, pl	lease call:	
Hien Do	_{at} 225 \ 223-3413	
Name of Contact Person	Area Code Daytime Telephone No	umber
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following am \$\Bigsim \frac{1}{25.00} \text{ Filing Fee} \frac{1}{2} \frac{130.00}{2} \text{ Filing Fee} \frac{1}{2} \text{ \$130.00 Filing Fee} \text{ \$130.00 Filing Fee} \text{ \$130.00 Filing Fee} \text{ \$130.00 Filing Fee} \text{ \$130.00 Filing Fee} \text{ \$130.00 Filing Fee} \qquad	iling Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing	ng Fee, Certificate Certified Copy

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

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

1. Fuzzy Rides LLC (Name of Foreign Limited Liability Company: must in	nclude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of Liability Company," "L.L.C," or "Ll.C.")	of transacting business in Florida. The alternate name must include "Limited
₂ Louisiana	_{3.} 47-3516923
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4 4/17/2015	
(Date first transacted business	s in Florida, if prior to registration.) 205, F.S. to determine penalty liability)
_{5.} 3010 Grassy Lake Drive	
Baton Rouge, Louisiana 70816	
6. 3010 Grassy Lake Drive	ress of Principal Office)
Baton Rouge, Louisiana 70816	ASS T
(Ma	ailing Address)
7. The name, title or capacity and address of the po	; — , . · · · · · · · · · · · · · · · · · ·
Hien Do - Owner	
3010 Grassy Lake Drive	
Baton Rouge, Louisiana 70816	
having custody of records in the jurisdiction under t	o more than 90 days old, duly authenticated by the official the law of which it is organized. (A photocopy is not e, a translation of the certificate under oath of the translator

Signature of an authorized person
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Hien Do

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:				
Fuzzy Rides LLC				
If unavailable, the alternate to be used in the state of Florida is:				
	_			

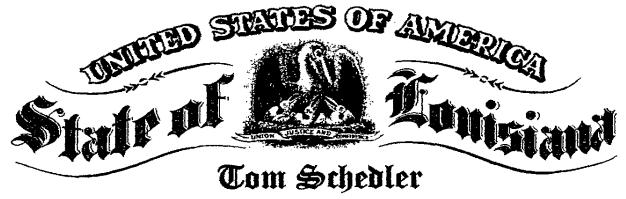
2. The name and the Florida street address of the registered agent and office are:

Matthew Do				
	(Name)		2015	
1900 Tamiami Trail N		2 (A) 2 (A)	APR	The state of the s
Florida Stre	eet Address (P.O. Box NOT ACCEPTABLE)	SSF SSF	_	-
Naples	FL 34102	16733 4833	P# 1:	To make the
	City/State/Zip	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2	2000

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana I do hereby Certify that

a copy of the Articles of Organization and Initial Report of

FUZZY RIDES LLC

Domiciled at BATON ROUGE, LOUISIANA,

Was filed and recorded in this Office on March 25, 2015,

And all fees having been paid as required by law, the limited liability company is authorized to transact business in this State, subject to the restrictions imposed by law, including the provisions of R.S. Title 12, Chapter 22.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

> JIMUUUUX Secretary of State

March 25, 2015

Certificate ID: 10583882#UXM73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

WEB 41831686K