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COVER LETTER

TO:	Registration Section . Division of Corporations				
	O Coinn Administration, LLC				
SUBJ	Name of Limited Liability Company				
		_			
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificance, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida,				
Please	return all correspondence concerning this matter to the following:				
	Tammy Wachter				
	Name of Person				
	Firm/Company				
	781 Brittany Park Blvd				
	Address				
	Tarpon Springs, FL 34689				
	City/State and Zip Code				
	tammywachter@gmail.com E-mail address: (to be used for future annual report notification)				
For fur	ther information concerning this matter, please call:				
	Legally Mine 800 375-2453 at (
	Name of Contact Person Area Code Daytime Telephone Number				
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				
Enclos	ed is a check for the following amount: \$\Boxed{\text{S125.00 Filing Fee}} \Boxed{\text{D} \$130.00 Filing Fee & Certificate of Status} \Boxed{\text{D} \$155.00 Filing Fee & D \$160.00 Filing Fee, Certificate of Status} \Boxed{\text{Certified Copy}} \$\Boxed{\text{Certified Copy}} \Boxed{\text{Certified Copy}} \$\Boxed{\text{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:

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limite Jability Company," "L. C," or "LL	(Name of Fore	eign Limited Liability Company; must include "Li	mited Liability Company," "L.L.C.," or	"LLC.")
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 693.0904 & 605.0905, F.S. to determine penalty liability) 1231 W Northern Lights Blvd #911 Anchorage, AK 99503 (Street Address of Principal Office) Tarpon Springs, FL 34689 (Mailing Address) (Mailing Address) (Mailing Address) Name: Tammy Wachter 781 Brittany Park Blvd Tarpon Springs (City) (City) Registered agent's acceptance: (City) Registered agent's acceptance: Attached agent and to accept service of process for the above stated corporation at the place designal is application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to compite the provisions of all statutes relative to the proper and complete performance of my daties, and I am familiar with and a new obligations of my position as registered agent. (Registered agent and agree to act in this capacity. I further agree to compite the provisions of my position as registered agent. (Registered agent and agree to act in this capacity. I further agree to compite the provisions of my daties, and I am familiar with and a new obligations of my position as registered agent. (Registered agent and agree to act in this capacity. I further agree to compite the provisions of my daties, and I am familiar with and a new obligations of my position as registered agent. (Registered agent and agree to act in this capacity. I further agree to compite the provisions of my daties, and I am familiar with and a new obligations of my daties, and I am familiar with and a new obligation of my daties, and I am familiar with and a new obligation of my daties, and I am familiar with and a new obligation of my daties, and I am familiar with and a new obligation and the obligation and address of the person obligation under the law of which it is organized. (If the certificate is in a foreign language, a translation	If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transactir " or "LLC.")	ng business in Florida. The alternate nam	ne must include "Limited
(Date first transacted business in Florida, if prior to registration) (See sections 655 0904 & 605 0905, F.S. to determine penalty liability) 1231 W Northern Lights Blvd #911 Anchorage, AK 99503 (Street Address of Principal Office) Tarpon Springs, FL 34689 (Mailing Address) Name: Tarmny Wachter Office Address: Office Address: (City) (Cit	Alaska	3		
Anchorage, AK 99503 (Street Address of Principal Office) Tarpon Springs, FL 34689 (Mailing Address) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Tammy Wachter Office Address: 781 Brittany Park Blvd Tarpon Springs (City) (City) (City) registered agent's acceptance: awing been named as registered agent and to accept service of process for the above stated corporation at the place designal is application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to come it the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and a e obligations of my position as registered agent. (Regis red agent's signature) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Oth Wachter, Jr, Member, 781 Bittany Park Blvd, Tarpon Springs, FL 34689 Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted) Signature of an authorized person and submitted accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information	(Jurisdiction under the law	of which foreign limited liability	(FEI number, if applicable)	,
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Typed or printed name of signee

Alaska Entity #10030454

State of Alaska Department of Commerce, Community, and Economic Development Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

O Coinn Administration, LLC

This entity was formed on June 26, 2015 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **July 09, 2015**.

Chris Hladick Commissioner

Ch Halix