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COVER LETTER

Fruition Coaching, LLC		
UBJECT: Name o	of Limited Liability Company	
	mpany for Authorization to Transact Business in Florida," C erenced foreign limited liability company to transact busines	
ease return all correspondence concerning this matter to the	he following:	
Megan Abbott		
	Name of Person	
Fruition Coaching, LLC		16 FEB 29
	Firm/Company	\? } }
9930 Cove View Drive East		9 PH 3: FH
	Address	ور. در
Jacksonville, FL 32257		.E.
City	/State and Zip Code	
info@fruitionpersonalcoaching.com		
E-mail address: (to be us	sed for future annual report notification)	
r further information concerning this matter, please call:		
Megan Abbott	720 446-8665	
Name of Contact Person	Area Code Daytime Telephone Number	
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	
nclosed is a check for the following amount: \$\Bigsim \mathbb{\sigma} \mathbb	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Cert of Status & 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: Fruition Coaching, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Colorado (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Upon registration (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 3540 Garfield St. Denver, CO 80205 (Street Address of Principal Office) 9930 Cove View Drive East Jacksonville, FL 32257 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Megan Abbott Name: 9930 Cove View Drive East Office Address: Jacksonville , Florida 32257 (City) Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Megan Abbott, President/Owner- 9930 Cove View Drive East, Jacksonville, FL 32257 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, 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.

Megan Abbott

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Fruition Coaching, LLC

is a

Limited Liability Company

formed or registered on 08/12/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131465401.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/22/2016 that have been posted, and by documents delivered to this office electronically through 02/23/2016 @ 09:31:08.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/23/2016 @ 09:31:08 in accordance with applicable law. This certificate is assigned Confirmation Number 9514673

optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://

www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



Mogna N. Williams

Secretary of State of the State of Colorado

SECRETARY OF STATE