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### COVER LETTER

TO:	Registration Section Division of Corporations					
CHDI	Splash Four Holdings, LLC CT:					
SUBJ	Name of Limited Liability Company					
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Coe, and check are submitted to register the above referenced foreign limited liability company to transact business					
Please	eturn all correspondence concerning this matter to the following:					
	Benjamin White					
	Name of Person					
	Splash Four Holdings, LLC dba Ten Star Supply					
	Firm/Company					
	6122 Benjamin Rd					
	Address					
	Tampa, FL 33634					
	City/State and Zip Code					
	ben@tenstarsupply.com	APR 21 PM 2: 08				
	E-mail address: (to be used for future annual report notification)	(i)				
For fu	ner information concerning this matter, please call:	8 <u></u>				
	Ben White 813 254-6921 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	<del></del>				
Enclos	d is a check for the following amount:  ■ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status  Certificate of Status  Certified Copy  of Status & Certified Copy	ficate				

## 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:

	AMINEAS IN THE STATE OF PLOKIDA	A:		
1. Splash Four Holdings,	eign Limited Liability Company; mu	ist include "Limited Li	ability Company." "L.L.C" or	"LLC.")
(Name of For	eigh Emitted Elabitity Company, inc	ist metade Limited Li	don'ty Company, E.E.C., or	LLC. )
(If name unavailable, enter a Liability Company," "L.L.C.	Iternate name adopted for the purpos " or "LLC.")	-	ess in Florida. The alternate nam	e must include "Limited
2. Delaware, USA		3. 812069857		
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)	
4. 15 April 2016				
<b>7.</b>	(Date first transacted busing (See sections 605.0904 & 605	ess in Florida, if prior t	to registration.)	-
5. 6122 Benjamin Rd	(See sections 603.0904 & 603	1.0703, F.S. to determin	не репаку навику)	
Tampa, FL 33634				
·	(Street Address of	Principal Office)		
6. same as above				METARY STEATE
				2 47Fr.
West of the Control o	(Mailing	Address)		- 5 maje
7 Name and stood address		•		2
7. Name and street addres	ss of Florida registered agent: (P	".U. Box <u>NOT</u> accep	otable)	12:09
Name:	Benjamin White		_	<u> </u>
Office Address:	6122 Benjamin Rd		_	
	Tampa		, Florida 33634	
	(City)		(Zip code)	•
Registered agent's accep	tance: gistered agent and to accept ser	vice of process for t	he ahove stated limited liahii	lity company at the place
designated in this applica	tion, I hereby accept the appoin	itment as registered i	agent and agree to act in thi	s capacity. I further agree
	ons of all statutes relative to the my position as registered age <b>nt</b> ?		te performance of my duties,	and I am familiar with and
accept and annightant of		////		
	(Regist	tered agent's signature	<del>}</del>	
		-		
	acity and address of the person(s)	) who has/have autho	ority to manage is/are:	
Benjamin White -man	140/			<del></del>
6122 Benjamin Rd				
Tampa, FL 33634				
<ol> <li>Attached is a certificate jurisdiction under the law;</li> </ol>	of existence, no more than 90 da of which it is organized. (If the c	ays old, duly authenti	icated by the official having of	sustody of records in the
of the translator must be st			igh language, a translation of	the certificate under oath
			al and a second	
	Signature	of an authorized person	on	
This document is assessed		•		. C. 1
submitted in a document to	in accordance with section 605.0	u∠u3 (1) (b), Florida	Statutes. I am aware that any	taise information

Benjamin White Typed or printed name of signce

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "SPLASH FOUR HOLDINGS, LLC", FILED IN THIS OFFICE ON THE THIRTIETH DAY OF MARCH, A.D. 2016, AT 9:20 O'CLOCK A.M.

16 APR 21 PH 2: 09



Authentication: 202085090

Date: 04-02-16

6003105 8100 SR# 20161959672

#### CERTIFICATE OF FORMATION OF LIMITED LIABILITY COMPANY

State of Delaware
Secretary of State
Division of Corporations
Delivered 09:20 AM 03/30/2016
FILED 09:20 AM 03/30/2016
SR 20161959672 - File Number 6003105

FIRST. The name of the limited liability company is Splash Four Holdings, LLC.

SECOND. The address of its registered office in the State of Delaware is 160 Greentree Drive, Suite 101, Dover, Delaware 19904 in the County of Kent. The name of its Registered Agent at such address is National Registered Agents, Inc.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation on this 21th day of March, 2016.

RY.

Anthony Georgiadis, Authorized Person