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Special Instructions to Filing Officer:				
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NOV 1 6 2016 S. YOUNG TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporation	ons				
SUBJECT: SRT	Holdings, LUC Name of I	Limited Liability C	ompany		-
The enclosed "Application by Fo Existence, and check are submitt					
Please return all correspondence	concerning this matter to the	following:			
_Sara	h R Mompson	ame of Person			-
	Fir	rm/Company			
3998	Lemonwood Dr	Address			-
Saras	ota, FL 34232 City/St				16 NOV 14 PH W. 21
<u>adss.</u>	Sarah egmail E-mail address (to be used	· CUM	report noti	fication)	- PA - PA
For further information concerni					4: 21
Sarah RTI Name	NYPSON of Contact Person	at (941 Area Code	-/	time Telephone Number	_
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton Bo 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclosed is a check for the follow ☐ \$125.00 Filing Fee	wing amount: \$\forall \forall \forall 130.00 \text{ Filing Fee & Certificate of Status}	☐ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Cof Status & Certified Co	

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 RUSINESS IN THE STATE OF FLORIDA:

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: SRT Holdings, 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.")
2. Nevado. (Jurisdiction under the law of which foreign limited liability company is organized) 3. VIA (FEI number, if applicable)
4. Upon Filing (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 4730 South Fort Apache Rd. Ste. 300
Las Vegas, NV 89147 (Street Address of Principal Office)
(Street Address of Principal Office) 6. 3998 Lemonwood Dr. Sarasota, FL 34232 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Sarasota, FL 34232 (Mailing Address)
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Name: <u>Sarah R mumpsun</u>
Office Address: 3998 Lemon wood Dr.
Sarasota , Florida 34232 (City) (Zip code)
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.
Sarah & Thumpour (Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Sarah RThompson, manager, 3998 Lemonwood Dr. Sarasota, F
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)
Signature of an authorized person
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.

R Thumpson
Typed or printed name of signee

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, SRT HOLDINGS, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 7, 2016, and is in good standing in this state.

A PYADA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on November 9, 2016.

Bollars K. Cagerske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20161109-1763
You may verify this electronic certificate
online at http://www.nvsos.gov/