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COVER LETTER

TO:	Registration Section Division of Corporations				, , , ,	
SUBJI	Adorable IO LLC					
coby.		Name of I	Limited Liability (Company		
The en	closed "Application by Foreignce, and check are submitted t	gn Limited Liability Comp to register the above refere	any for Authoriza	tion to Tra	ansact Business in Florida," y company to transact busin	Certificate of less in Florida
Please	return all correspondence con	acerning this matter to the	following:			
	James Remsik Jr					
		Na	ame of Person			
	Adorable IO LLC					
		Fi	rm/Company			
	123 E. Main St 2n	nd Fl				
		-	Address			
	Madison, WI 5370	03				
		City/St	ate and Zip Code			
	admin@adorable.io					
	Ī	E-mail address: (to be used	for future annual	report not	ification)	
For fur	ther information concerning t	his matter, please call:				
	Jen Remsik		608 at (513-65	18	
	Name of C	Contact Person	Area Code	Day	rtime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301	
Enclos		g amount: \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop	

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

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, Adorable IO LLC		10271.		
	eign Limited Liability Company	; must include "Limited Lia	bility Company," "L.L.C.," or	"LLC.")
Liability Company," "L.L.C."	Iternate name adopted for the pu " or "LLC.")	rpose of transacting busines	ss in Florida. The alternate nan	ne must include "Limited
2.WI		3. 46-4308993		
(Jurisdiction under the law company is organized)	of which foreign limited liabilit	У	(FEI number, if applicable)	
4. 12/13/2016				
	(Date first transacted by (See sections 605,0904 &	usiness in Florida, if prior to 605.0905, F.S. to determin	o registration.)	
5. 123 East Main St 2nd I			- r,	•
J			.	
				門自有
6. 123 East Main St 2nd F		s of Principal Office)		調のア
6. 12.5 Edist Wall St 2nd 1	1, Wadison W1 5,5705			- 55% O TT
				THE REPORT
	(Mai	ling Address)		70 13
7. Name and street addres	ss of Florida registered agent	: (P.O. Box NOT accep	table)	MINDER 19 PH 2:38
Name:	InCorp Services Inc		<u> </u>	
Office Address:	17888 67th Court North		_	
	Loxahatchee		, Florida 33470	
	(City	y)	(Zip code)	-
designated in this applicate to complywith the provision	gistered agent and to accept tion, I hereby accept the app ons of all statutes relative to my position as registered ago	pointment as reginered of The proper and complete	ngent and agree to act in the e performance of my duties	is capacity. I further agre
8. The name, title or capa	acity and address of the perso	on(s) who has/have autho	rity to manage is/are:	
James Remsik Jr, Owner,	123 E. Main St 2nd Fl, Madi	ison W1 53703		
				
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 9 of which it is organized. (If tubmitted)	of days old, duly authenti he certificate is tha forei	cated by the official having gn language, a translation o	custody of records in the f the certificate under oath
	8ign:	ature of an authorized perso	on (
This document is executed submitted in a document to	I in accordance with section 6 the Department of State con	605.0203 (1) (b), Florida astitutes a third degree fel	Statutes. I am aware that any ony as provided for in s.817	/ false information .155, F.S.
	James Remsik Jr	•	•	-

Typed or printed name of signee

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS



Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, DAVID DUECKER, Deputy Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

ADORABLE IO LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is December 16, 2013.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on August 15, 2016.



DAVID DUECKER, Deputy Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 194027 99EE0D41