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TO:	Registration	Section					
	Division of C		os.				
	<i>!</i>						
OLID II	EntryUS	LLC					
SUBJE	=U1:	· · · · · · · · · · · · · · · · · · ·	Name of	Limited Liability	Company		
			Nume of	Emined Elabinty	company		
						insact Business in Florida," y company to transact busin	
Please	return all corre	spondence c	oncerning this matter to the	e following:			
	Eril	: Lieberman					
			1	Name of Person			
				Firm/Company			
	133	Pompano D	OR SE				
				Address			
	St. 1	Petersburg, l	FL 33705				
	<u></u>		City/S	State and Zip Code			
	eliebo	erman@entr	vus.com	•			
				1.6			
			E-mail address: (to be use	ed for future annual	report not	ification)	
For fur	ther information	n concerning	g this matter, please call:				
Erik Lieberman		202	765-18	00			
		Name o	f Contact Person	at (Area Code	_) Day	time Telephone Number	
	N 4 A 11 1 N 10 /	יטטטרניני.			OTDEET	. ADDDE00	
MAILING ADDRESS: Division of Corporations				ADDRESS: of Corporations			
	Registration !					ion Section	
	P.O. Box 632				Clifton B		
	Tallahassee,					ecutive Center Circle	
	.,					see, FL 32301	
Enclos	ed is a check fo	r the follows	ing amount:				
	□ \$125.00 F		■ \$130.00 Filing Fee &	□ \$155.00 Filir	ig Fee &	□ \$160.00 Filing Fee, Ce	rtificate
		=	Certificate of Status	Certified Copy	=	of Status & Certified Cop	

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:

COMPANY TO TRANSACT BU 1. Entry US LLC	ISINESS IN THE STATE OF FLORIDA:		
(Name of Fore	ign Limited Liability Company; must include "l	imited Liability Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter all Liability Company," "L.L.C,"	ernate name adopted for the purpose of transact or "LLC.")	ing business in Florida. The alternate name	must include "Limited
2. Delaware	3. 47-	1168509	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4			
5. 801 3rd Street South, S	(Date first transacted business in Florid (See sections 605.0904 & 605.0905, F.S.) uite 120	a, if prior to registration.) o determine penalty liability)	
St. Petersburg, FL 3370	01		
	(Street Address of Principal Of	fice)	7.
6. 801 3rd Street South, St	uite 120		JAH 17
St. Petersburg, FL 3370)1		
	(Mailing Address)		2 190
7. Name and street address	s of Florida registered agent: (P.O. Box N	OT_acceptable)	# (<u>11)</u>
Name:	Erik Lieberman		<u>မ</u> ေ
Office Address:	801 3rd Street South, Suite 120		
Office Address.	St. Petersburg	, Florida ³³⁷⁰¹	•
	(City)	(Zip code)	
designated in this applicate to complywith the provision	gistered agent and to accept service of pro- tion, I hereby accept the appointment as re- tons of all statutes relative to the proper and my position as registered agent. (Registered agent's	gistered agent and agree to act in this of complete performance of my duties, a	capacity. I further agree
8. The name, title or capa	city and address of the person(s) who has/h	-	
Erik Lieberman, Managin		are damently to manage is also	
			
			
 Attached is a certificate jurisdiction under the law of of the translator must be su 	of existence, no more than 90 days old, dul of which it is organized. (If the certificate is bmitted)	y authenticated by the official having cu in a foreign language, a translation of th	stody of records in the ne certificate under oath
	Signature of an autho	rized person	
	in accordance with section 605.0203 (1) (b		

Typed or printed name of signee

Erik Lieberman

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ENTRYUS LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTY-EIGHTH DAY OF DECEMBER, A.D. 2016.

Authentication: 203598096

Date: 12-28-16