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## Foreign Limited Liability Company Inddeveo LLC

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## Fax Audit 417000179257 3

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

COMPANY TO TRANSACT BI	INNESS IN THE STATE OF FLORIDA:	ON INC ESCUENCE FOR	ERRY LIBRIED LIADUALI
l. Inddevco LLC			
(Name of For	eign Limited Liability Company; must include "	Limited Liability Company," "L.L.C.," or "LL	C.")
If name unavailable, eraer al	Remain name adopted for the purpose of transac	ting business in Florids. The alternate name n	nat include "Limited
isbility Company," "L.L.C.			
Delaware		32-1757056	
(Attribution under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
Upon filings			
	(Date first transacted business in Florid (See sections 605,0904 & 605,0905, F.S.	a, if prior to registration.) to determine penalty liability)	
5001 NW 13th Ave	Suite K, Pompeno Beach, Florida 33064		
	(Sireet Address of Principal O	fice)	
5001 NW 13th Ave	Suite K., Pompano Beach, Florida 33064		
,	(Mailing Address)		
. Name and street addres	s of Florida registered agent: (P.O. Box N	OT accentable)	£
	Business Fillings Incorporated		
Name:	1200 South Pine Island Road		
Office Address:			CO - CALLED
	Plantation	, Florida 33324	E C C C C C C C C C C C C C C C C C C C
0.0000000000000000000000000000000000000	(City)	(Zip code)	
Registered agent's accep <i>Having bee</i> n name <i>d as re</i>	ixince: gistered agent and to accept service of pro	cess for the above stated limited Hability	company at the place,
lesignated in this applica	tion. I hereby accept the appointment as re	egistered agent and agree to act in this co	apacity. Hitriner agree
o complywille the provision	ons of all statutes relative to the proper an	d complete performance of my ditties, an	d I am familiar will and
ccept the obligations of i	ny position as revisiered agent.		25
	Mark		
	(Registered agent'	s signature) Mark Williams, A.V.P., Bus	iness Filings Incorporated
3. The name, title or capa	scity and address of the person(s) who has/t	nave authority to manage is/are:	
Member: Jon Ruggles,	5001 NW 13th Ave Suite K, Pompano B	each, Florida, 33064	
Member: Ivonne Ruggi	les, 5001 NW 13th Ave Suite K, Pompan	Beach, Florida 33064	
			<del></del>
. Attached is a certificate	of existence, no more than 90 days old, du	ly authenticated by the official having cust	tody of records in the
urisdiction under the law	of which it is organized. (If the certificate is	in a foreign language, a translation of the	r certificate under oath
f the translator must be s	ubmitted	and the same of th	
	4.6		
	Signature of an author	orized person	
This document is executed ubmitted in a document to	in accordance with section 605,0203 (1) (but the Department of State constitutes a third	o), Florida Statutes. I am aware that any fal degree felony as provided for in s.817.15:	lse information 5, F.S.
	Jon Ruggles, Member		
	Typed or printed non	of signee	

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "INDDEVCO 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 NINTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

6431306 8300 SR# 20174681539

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202686267

Date: 05-09-17