(Requestor's Name)							
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COVER LETTER

	sion of Corporation	ns					
SUBJECT:	Limosa, l	_LC					
Solution .			Limited Liability Company				
				ansact Business in Florida," Certificate of y company to transact business in Florida			
Please return	all correspondence	concerning this matter to the	following:				
	Alex Pl	hillips					
		N	ame of Person				
	Ophrys	s, LLC					
Firm/Company							
	2003 V	Vestern Ave,	Suite 340				
			Address				
	Seattle	, WA 98121					
		City/S	tate and Zip Code				
	licensin	g@ophrysind	c.com				
		E-mail address: (to be used	d for future annual report no	tification)			
For further in	formation concerning	g this matter, please call:					
A	lex Phillip	S	_{at (} 206) 267	7-9992			
 -	Name o	of Contact Person	Area Code Day	ytime Telephone Number			
Divi Regi P.O.	ILING ADDRESS: sion of Corporations istration Section Box 6327 ahassee, FL 32314		Division Registrat Clifton E 2661 Exc	TADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301			
	check for the follow 125,00 Filing Fee	ring amount: \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION 605.0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Limosa, LLC (Name of Foreign	Limited Liability Company, must include "Limit	ted Labilit	y Company," "L.L.C.," or "I.I.C.")	-	
(if i	tame unavailable, enter atternate n	nme adopted for the purpose of transacting business in F	kırida, The a	lternate name must include "Limbed Lia	bility Company," "L. L.C," or "LL	.c.n	
2. Delaware (harsdiction under the law of which foreign limited liability company is organized)				3(FEI number, if applicable)			
4.		(Date first transacted business in Florida, if prior) (See sections 603.0904 & 605.0905, F.S. to deter	o registration	h)			
5.	2003 Western Aven	nue	6.	2003 Western Avenue		_	
Suite 340		Principal Office)		Suite 340			
	Seattle, WA 98121			Seattle, WA 98121	2= K: =	<u>-</u>	
7.	Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u>	acceptable)		1 DC1 -	
	Name:	Corporation Service Company			6		
	Office Address:	1201 Hays Street			AG C.		
		Tallahassee		, Florida <u>32301</u> (Zip cox	ORID/ - 1000/ - 1000/	<u>}</u>	
Ho de. to	signated in this applica comply with the provisi	stance: egistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prope s of my position as registered agent. (Registered agent)	as regist er and co	ered agent and agree to act	I liability company at the in this capacity. I furt	he place ther agree	
8.	The name, title or caps Title or Capacity:	(Registered Agent' acity and address of the person(s) who be Name_and Address:	nas/have	authority to manage is/are: itle or Capacity:	Name and Address:		
	Manager	Ophrys 2003 Westorn Avm., Suita 340 Sciettle, WA 96121	<u>-</u> -				
9. jur		of existence, no more than 90 days old of which it is organized. (If the certification intended)	ate is in a				
		uted in accordance with section 605,020 to the Department of State constitutes a t				tion	

Typed or printed name of signee

Alex Phillips, Authorized Representative

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LIMOSA, 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 TENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIMOSA, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF APRIL, A.D. 2017.

6393973 8300

SR# 20176549464

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

Juffrey N. Budlack, Sacretary of State

Authentication: 203376299

Date: 10-10-17