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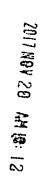
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November 22, 2017

DAVID KIVITZ 15701 E HIGHWAY 50, UNIT 203 CLERMONT, FL 34711

SUBJECT: XRACTION SERVICES, LLC

Ref. Number: W17000093300

We have received your document for XRACTION SERVICES, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 217A00023746

COVER LETTER

TO: Registration Section Division of Corporati	ons					
Xtraction Services	s, LLC					
SUBJECT:	Name of	Limited Liability (Company			
The enclosed "Application by F Existence, and check are submit						
Please return all correspondence	concerning this matter to the	following:				
David Kivitz						
	8	ame of Person		-		
Xtraction Ser	vices, LLC					
 		irm/Company				
15701 F. High	away 50, Unit 203					
		Address			_	
Clermont, FL	34711					
	City/S	tate and Zip Code			<u> </u>	- 1
dkivitz@archyt	asventures.com				;»	£.
	E-mail address; (to be use	d for future annual	report nout	cation)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	α
For further information concerns	ing this matter, please call:				138. 1	Lo
David Kivitz		202 at (309-1166	,	HASSEE, FLORIN	AK
Name	of Contact Person	Area Code	Daytii	me Telephone Number	© -	, (S)
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registration Clifton Bui	lding itive Center Circle	5.	9
Enclosed is a check for the follo	wing appoint: 10.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin	y Fee &	□ \$160.00 Filing Fee, (of Status & Certified Co		=

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

IN COMPLIANCE WITH SECTION (05/0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

V							
Xtraction Services, LL	Limited Liability Company; must include "Limited	Liability Company "" 17" " 17"	••				
(*************************************	. Emilia (manny Company, mast monute Chance	commity Company, 121745, or life	•				
(If name unavailable, enter alternate)	name adopted for the purpose of transacting business in Finn	ica. The alternate name must include "Limited L	Jability Company, ""L.1, C.7 or "(1,C.1)				
2. Delaware	· · · · · ·						
	shick foreign limited lightlip company is organized)	(FFI rue	nect, it applicantle)				
4. N/A							
4. <u>1976</u>	(Date lies transacted business in Florals, if prair to re (See sections 605 0904 & 605 0905, F.S. to determine	grammer)					
1670111111							
5. 15701 E Highway 50 Unit 203 (Sirect Address of Principal Offices) 6. 15701 E Highway 50 Unit 203 (Making Address)							
Clermont, FL 34711		Clermont, FL 34711	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
· · · · · · · · · · · · · · · · · · ·							
			•				
7 Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)					
*. *******	- · · · · · · · · · · · · · · · · · · ·		Ÿ,				
Name:	Income Scanin	us, Inc					
Office Address:	17888 67TH (co-	+ North					
			70 CO				
	Lexabatchee	Florida <u>5.5 7</u>					
Registered agent's accep	stance:		(T)				
Having been named as re	egistered agent and to accept service of pr ition, I hereby accept the appointment as	rocess for the above stated limite	d liability company at the place !				
to comply with the provisi	ions of all statutes religive to the proper a	regisserea ageni ana agree io ac ind complete performance of my	duties, and I on familiar with				
and accept the obligation	s of my pasition of registered agent.	, , , ,					
	Courtney Thor	mas on behalf of InCorp Servic	es, Inc.				
	(Regulered agent's vig	इन् श बंद)					
8. The name, title or capa	acity and address of the person(s) who has	Thave authority to manage iclass:					
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:				
CEO	David Kivitz	COO	Joshua Carmona				
	15701 E Highway 50 Unit 203		15701 E Highway 50 Unit 20				
	Clermont, FL 34711		Clermont, FL 34711				
One Discours	Chair Care Lib						
Ops Director	Chris Seefeldt 15701 E Highway 50 Unit 203						
	Clermont, FL 34711						
(Use attachments if necess	sami						
•	•						
9. Attached is a certificate	of existence, no more than 90 days old, de	uly authenticated by the official h	aving custody of records in the				
of the translator must be st	of which it is organized. (If the certificate	is in a foreign language, a transla	tion of the certificate under oath				
of the flatishator mast be 1.	Tonkied)						
10. This document is execu	uted in accordance with section 605,0203 ((1) (b), Floride Statutes. I am awa	re that any false information				
submitted in a document to	the Department of State constitutes a third	d degree felony as provided for in	s.817.155, F.S.				
	C/6						
organism of an authorized person							
David Kivitz							
		ined name of signer	_ 				
	rypes or pr						



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

DELAWARE, DO HEREBY CERTIFY THAT "XTRACTION SERVICES LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR

REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY

AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE NINTH DAY OF OCTOBER,
2017, AT 9:17 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABIETTY COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "XTRACTION SERVICES LLC" WAS FORMED ON THE NINTH DAY OF OCTOBER, A.D. 2017.

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

And a so

Authentication: 202092227

Date: 02-05-18

6573139 8315 SR# 20180731737