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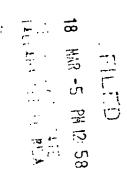
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### COVER LETTER

	degistration Section Division of Corporation	15				
SUBJECT	TANG O MAR, L	LC				
SODJECI	·	Name of	Limited Liability (	Company		
					unsact Business in Florida," Co y company to transact business	
Please retu	ırn all correspondence o	oncerning this matter to the	following:			
	Gustavo Carbal	lal				
		N	ame of Person			
	·	Fi	rm/Company		<del> </del>	
	407 W. Broadw	vay				
			Address			
	Danville, Kentu	icky 40422				
		City/S	tate and Zip Code			
	gustavo@chartpr	o.org				
		E-mail address: (to be used	for future annual	report not	ification)	
For further	r information concernin	g this matter, please call:				
C	Gustavo Carballal		678 at (	522-9	366	
_	Name o	f Contact Person	Area Code	Day	time Telephone Number	
D R P	AILING ADDRESS: Division of Corporations Legistration Section .O. Box 6327 Fallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	s a check for the follow 1 \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155,00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certi of Status & Certified Copy	ficate

# 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 ITABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flori	ida The alten	nate name must include "Limited Lie	ability Company	"1l. C.	." or "[.1.	.C.")
Kentucky (Jurisdiction under the law of w	high foreign limited liability company is organized)	3	(FEI nur	ber, if applicable	•)		-
	(Date first transacted business in Flonda, if prior to re (See sections 605 0904 & 605,0905, F.S. to determin	egistration) re penalty liai	bility)	<del></del> -			
407 W. Broadway		6. <u>4</u>	07 W. Broadway				_
(Street Address of Danville, KY 40422	Principal Office)		(Mailing Add	iress)			
	·	_	10,22				-
	<del></del>	_	<del></del>	· :=	c	<b>x</b> 0	-
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acc	ceptable)	 :	· ·		
Name:	Gustavo Carballal		• ,			י נח	<u></u> ,
Name:		<u>-</u>	<u> </u>	-		_	7
Office Address:	81 Tang O Mar Drive			-		<u> </u>	
	Miramar Beach		, Florida 32550		- •	.∵	
	(C-11.4)		(Zip co	le) >	- ' ' '	CD CD	
aving been named as re signated in this applica comply with the provis	egistered agent and to accept service of partion, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.	registere and comp	ed agent and agree to act	in this cap	acity.	I furt	her a
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Typed or printed name of signee

# Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

### Certificate of Existence

Authentication number: 199546

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

## TANG O MAR, LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is February 13, 2018 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 26<sup>th</sup> day of February, 2018, in the 226<sup>th</sup> year of the Commonwealth.



Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

199546/1010980