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| (Req | uestor's Name) | - |
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COVER LETTER

| TO: | Registration Sec Division of Corp | | | |
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| SUBJE | EMPIRE DI | RECT LLC | | |
| 1 | | N | ame of Limited Liability (| Company |
| | | | | ation to Transact Business in Florida," Certificate of ted liability company to transact business in Florid |
| Please | return all correspon | ndence concerning this matte | er to the following: | |
| 1 | LEIGH | STAFFORD | | |
| | | | Name of Person | |
| | PRECIS | SE PLANNING | | |
| | | | Firm/Company | |
| , | 430 E. 1 | TAYLOR ST. | | |
| | | | Address | |
| | RENO, | NV 89502 | | |
| | · | | City/State and Zip Code | |
| | LEIGH@ | PRECISEPLANNING.NET | Γ | |
| | | E-mail address: (to | be used for future annual | l report notification) |
| Fo r fu r | ther information co | oncerning this matter, please | call: | |
| | LEIGH STAFFO | ORD | 775 at (| 848-6265 |
| | | Name of Contact Person | Area Code | Daytime Telephone Number |
| · • | MAILING ADD Division of Corp Registration Sect P.O. Box 6327 Tallahassee, FL 3 | orations tion | | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclos | ■ \$125.00 Filing | e following amount: g Fee | | - - |

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

IN COMPUNIE WITH SHATEN OBDIES, FLORIDA STATUTES, THE POLICIONAL INNERMITTED TO RESISTER A KIRFEN LIMITED HARLING COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA.

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| Common Address of Plantacitation Coding Address Coding Address Coding Address | |
| Name and street address of Florids registered agent. (P.O. Box. NUT acceptable) | |
| Name and street address of Florids registered agent (P.O. Box, NOT acceptable) | |
| In Comp Summer Land | |
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| In Corn Survey Land | |
| Name InCorp Services, Inc. | |
| 14400 | |
| Office Address: 17883 67th Court North | |
| Office Address: 1/883 6/th Court North | - |
| Leuxshatchee , Floreda 33470 | |
| (Zay colt) (Zay colt) | |
| Kathy Shin on behalf of InCorp Se | .* |
| (Eightent speck ogster) | Service: |
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| The name, title or capacity and address of the person(s) who has/have authority to manage 15/2re. Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name and Address: Name and Add Manager Cornnae Tesh 3948 3rd St South Sone #334 | |
| The name, title or capacity and address of the person(s) who has/have authority to manage 15/2re. Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name and Address: Name and Add Manager Cornnae Tesh 3948 3rd St South Sone #334 | |



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

EMPIRE DIRECT LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 4th day of March, 2016, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

of Raleigh, this 7th day of March, 2018.

Claime 4. Marshall

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City

Secretary of State

Certification# 101917534-1 Reference# 14292325- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification