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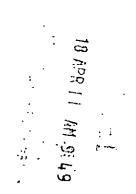
(Re	equestor's Name)				
(Ad	idress)				
(Ad	ldress)				
(Ci	ty/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Name)				
(Document Number)					
Certified Copies	_ Certificates of	Status			
Special Instructions to Filing Officer:					
		}			

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COVER LETTER

	egistration Section ivision of Corporati	ons				
SUBJECT		RATEGY & SUPPLIES LLC				
SOBJECT	•	Name of L	imited Liability Compa	any		
The enclos Existence,	ed "Application by F and check are submit	oreign Limited Liability Comp ted to register the above refere	any for Authorization to need foreign limited lia	o Transact Business in Florida," Certificate of billity company to transact business in Florida		
Please retu	m all correspondence	concerning this matter to the	following:			
	MARSHA S	IHA				
Name of Person						
	INCFILE.CO	DM LLC				
17350 STATE HWY 249 SUITE 220						
			Address			
	HOUSTON	TX 77064				
		City/Si	ate and Zip Code			
	marsha@inct	ile.com				
		E-mail address: (to be used	for future annual repo	rt notification)		
For further	r information concern	ing this matter, please call:				
ħ	MARSHA SIHA		888 46	62-3453 X 701		
_	Nam	e of Contact Person	Area Code	Daytime Telephone Number		
D R P	MAILING ADDRES Division of Corporation egistration Section O. Box 6327 allahassee, FL 32314	ns	Divi Reg Clift 266	REET ADDRESS: ision of Corporations istration Section ton Building I Executive Center Circle ahassee, FL 32301		
Enclosed i	s a check for the follo \$125.00 Filing Fee	owing amount: \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee Certified Copy	e & \$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 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Fore	ign Limited Liability Company; must include "Limit	ed Liability Company," "L.L.C.," or "LLC	2.")
iability Company," "L.L.C,"	ternate name adopted for the purpose of transacting b	ousiness in Florida. The alternate name mo	ust include "Limited
DE	3.		
(Jurisdiction under the law of company is organized)	of which foreign limited liability	(FEI number, if applicable)	
N/A			
	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to det	prior to registration.)	
6176 Mohawk Ter	(See Sections 003.0904 & 003.0903, 1.3. to det	termine penanty nationity)	
Margate FL 33063			
	(Street Address of Principal Office)		
6176 Mohawk Ter			
Margate FL 33063			
	(Mailing Address)		
Name and street addres	s of Florida registered agent: (P.O. Box NOT a	acceptable)	
Name:	Catalina Henao		·
Office Address:	6176 Mohawk Ter		, co
	Margate	Florida 33063	. 🛪
	(City)	, Florida(Zip code)	
egistered agent's accept		(4.7 10.07)	
esignated in this applicat complywith the provision	gistered agent and to accept service of process tion, I hereby accept the appointment as registions of all statutes relative to the proper and corny position as registered agent.	ered agent and agree to act in this ca	pacity. I further agi
	(Registered agent's sign	ature)	
=	acity and address of the person(s) who has/have	• •	
	BR - 11765 W ATLANTIC BLVD APT 21 BR - 9510 Sunset Strip, Sunrise, FL 33322		
-			<u></u>
Hayden Almorales - Al	MBR - 6176 MOHAWK TER, MARGATE,	FL 33063	
	of existence, no more than 90 days old, duly autof which it is organized. (If the certificate is in a abmitted) Signature of an authorized	foreign language, a translation of the	
his document is executed ubmitted in a document to	in accordance with section 605.0203 (1) (b), Floothe Department of State constitutes a third degr	orida Statutes. I am aware that any fal ee felony as provided for in s.817.155	se information , F.S.
	Catalina Henao	-	

Typed or printed name of signee





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "QUANTUM STRATEGY & SUPPLIES 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 FIFTH DAY OF APRIL, A.D. 2018.

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

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

6793647 8300 SR# 20182474294

Authentication: 202460585

Date: 04-05-18