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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
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07/09/18--01028--013 **125.00

7/11/18/05



July 2, 2018

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern,

Please find enclosed our Foreign Limited Liability business application, State of California certificate of status and payment of \$125. We have employed a resident of Florida who will work for us remotely. We will also need to obtain a payroll withholding account to provide to our payroll company. Please let me know if you need any further information.

Best regards,

Sue Gribovicz Controller PhatMojo, LLC Sue@phatmojo.com

(216) 280-3210

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Pha	ntMojo, LLC				
30B/BCT.	Name of	Limited Liability Co	ompany		_	
The enclosed "Application by For Existence, and check are submitted."						
Please return all correspondence	concerning this matter to the	following:				
	Suc	e Gribovicz				
	N	ame of Person			-	
PhatMojo, LLC						
Firm/Company						
3585 S Vermont Ave #7367					•	
Address						
	Los Ar	ngeles, CA 90007				
	City/S	tate and Zip Code	<u>-</u>		-	
	Sue@	phatmojo.com				
	E-mail address: (to be used	d for future annual r	eport not	ification)	-	
For further information concerning	g this matter, please call:					
Suc	e Gribovicz	216)	280-3210		
Name o	of Contact Person	Area Code	Day	time Telephone Number	-	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		1	Division (Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, F1, 32301		
Enclosed is a check for the follow S125.00 Filing Fee	ring amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	, Fee &	☐ \$160.00 Filing Fee, Cof Status & Certified Co		

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 LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

1.	PhatA	Mojo, LLC		
(Name of Foreign	Limited Liability Company; must include "Limit	ted Liability Comp	any," "L.L.C.," or "LLC.	.")
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	lorida. The afternate r	name must include "Limited I	.tability Company," "L.L.C," or "LLC")
2. Sta	te of California	2	82-2376022	
	high foreign funited liability company is organized)	J		mber, if applicable)
4	5/1/2018			
T	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	o registration) mine penalty hability)		
5. 801 S Hope	St #1302	6.		
(Street Address of Principal Office) Los Angeles, CA 90017		v. <u>—</u>	(Mailing A	ddress)
Los Angeles,	CA 90017			
	ss of Florida registered agent: (P.O. Bo. Christopher Oslebo	x <u>NOT</u> accept	able)	·
Name:			_	
Office Address:	811 SW 23rd Rd		_	
	Miami		_ , Florida 33129 (Zip c	
Registered agent's accep	(Cuy)		(Zip c	ode)
and accept the obligation.	s of my position as registered agent. (Registered agent)	s signature)		
8 The name title or cans	ncity and address of the person(s) who h			
Title or Capacity:	Name and Address:		Capacity:	Name and Address:
LLC Manager	Kyle McCarthy			
	1801 S Hope St Apt #1302			
	Los Angeles, CA 90017	_		
				
		_		
(Use attachments if neces	sary)			
	of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted)			
	uted in accordance with section 605.020 the Department of State constitutes a the Sull Sulvey	hird degree felc	ony as provided for it	
	Signatur	e of an juthorized per	rson	
	Sue Gribon Signatur Controller			

Typed or printed name of signee

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: PHATMOJO, LLC

FILE NUMBER: FORMATION DATE:

201721610264 08/03/2017

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION: CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

-4.7

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 7, 2018.

ALEX PADILLA Secretary of State