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Office Use Only



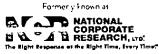
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SECRETARY OF STATE
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

	17	/		
Date:	7/16	/18		Account#: I20000000088
Name:	KEN H	OWELL	<u>.</u>	
Referenc	e #:	M102318		
Entity Na	me:	нот с	OSTS LLC	
✓ Article	s of Incorpo	oration/Author	ization to Transa	ct Business
Amen	dment			
☐ Chang	ge of Agent			
Reins	tatement			
☐ Conve	ersion			ISSUES - CALL KEN @ 518-213-0738
Merge	er			
Disso	lution/Withd	rawal		
☐ Fictito	us Name			
Other				
Authorize Signature	ed Amount:	\$125	5.00	

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: Hot Costs LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LL.C.") 83-1161530 Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 07/03/2018 (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 8321 Beverly Blvd 31 West 27th Street (Street Address of Principal Office) (Mailing Address) Los Angeles, CA 9 11th Floor New York, NY 10001 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. Name: 115 North Calhoun Street, Suite 4 Office Address: Tallahassee , Florida Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statute to the proper and complete performance of my duties, and I am familiar with and accept the obligations of new registered at ent. (Registered agent's signature) Vikki Saeteum, Assistant Secretary of COGENCY GLOBAL INC. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Manager Inman Young 8321 Beverly Blvd Los Angeles, CA 90048 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Inman Young

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HOT COSTS 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 SIXTEENTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOT COSTS LLC"

WAS FORMED ON THE THIRD DAY OF JULY, A.D. 2018.

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

Authentication: 203070990

Date: 07-16-18

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