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## **COVER LETTER**

TO:

Registration Section

Div	ision of Corporation	ns					
SUBJECT:	BUOYD LLC						
002011011		Name of Limited Liability Company					
					ansact Business in Florida," Certificate y company to transact business in Flori		
Please return	all correspondence	concerning this matter to the	following:				
	Krista Goodrid	ch					
	Name of Person						
	BUOYD LLC						
	Firm/Company						
	2800 S. Peninsula Drive						
	Address						
	Daytona Beach, FL 32118						
	City/State and Zip Code						
	kristadowling77	'@gmail.com					
		E-mail address: (to be use	d for future annual	report not	ification)		
For further in	nformation concernin	g this matter, please call:					
Krista Goodrich		678 at (	928-11	00			
	Name o	of Contact Person	Area Code	Day	time Telephone Number		
Div Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 lahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301		
	check for the follow 125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTEN, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUNINESS IN THE STATE OF FLORIDA:

COMPANTIOTRANSACTBO	MINENS IN THE STATE OF FLORIDA:		
I. BUOYD LLC			
(Name of Foreign	Limited Liability Company; must include "Lin	ited Liability Company," "L.L.C.," or "LLe	C.")
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in	Florida The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC,")
2. Delaware		3	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI i	number, if applicable)
<sub>1</sub> 7/1/2018			
T	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to dete	to registration )	<del></del>
5 2800 S. Peninsula D		6. Same	
(Street Address of Principal Office)		6. Mailing	Address) 6
Daytona Beach, FL 3	32118		SE C
	<del></del>		
7 Name and street address	ss of Florida registered agent: (P.O. B	ov NOT acceptable)	Sign of Charles
7. Name and street address	-	ox <u>NOT</u> acceptable)	原命 塞
Name:	Krista Goodrich	<del></del>	7
Office Address:	2800 S. Peninsula Drive		55
Office Addiess.			<u></u>
	Daytona Beach, FL	Florida 32118	
Registered agent's accep	(City)	(Zip	code)
	rgistered agent and to accept service of	of process for the above stated limi	ited liability company at the place
designated in this applica	tion, I hereby accept the appointment	t as registered agent and agree to i	act in this capacity. I further agree
to comply with the provise	ions of all statutes relative to the prop	per and complete performance of r	ny duties, and I am familiar with
and accept the obligation.	s of my position as registered agent.		
	- Charles	Doole	
	(Registered agen	nt's signature)	<del></del>
8. The name, title or cap:	acity and address of the person(s) who	has/have authority to manage is/ar	p-
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Managing Member	Tiana Goodrich		
ivialiaging ivieniber	19035 Miami Bivd	Managing Member	Yacht Dreams Managment 1280 Bel Aire Drive
	Fort Mvers. FL 33967		Daytona Beach, FL 32118
<u>M</u> ember	Island Dreams Investmen	nts	
	1280 Bel Aire Drive		
	Davtona Beach. FL 3211	<u>8</u>	
(Use attachments if neces	sary)		
O Attached is a contificate	of ovintance as more than 00 days of	di di lin anakana Santa di bin dia 1971 (s	Flore the consequence of the consequence of
	of existence, no more than 90 days of of which it is organized. (If the certific		
of the translator must be s		edic to the a foreign language, a trans	station of the certificate under out.
10. This document is exec	uted in accordance with section 605.02	203 (1) (b). Florida Statutes. I am a	ware that any false information
submitted in a document to	the Department of State constitutes a	-tnird degree telony as provided for	in s.817.155, F.S.
	, Telebo		
	Sinner	ture of adouthorized messon	<del></del>

Typed or printed name of signee

Krista Goodrich

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

DELAWARE, DO HEREBY CERTIFY "BUOYD 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 TWENTIETH DAY OF JULY, A.D. 2018.



Authentication: 203101734

Date: 07-20-18