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(Requestor's Name)	_						
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SECRETARY OF THE STATE O

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Skehana Systems L								
SOBJECT.			Limited Liability (Company					
		reign Limited Liability Comp d to register the above refero							
Please return	all correspondence of	concerning this matter to the	following:						
	Alfonso Guerra	1							
		N	ame of Person						
	Blum & Blum								
	Firm/Company								
	5511 N University Dr. Suite 101								
Address									
	Coral Springs, Ft. 33067								
City/State and Zip Code									
	alfonso@blumar	ndblum.com							
		E-mail address: (to be used	d for future annua	l report no	tification)				
For further in	nformation concernin	g this matter, please call:							
Alt	ionso Guerra		954 at (752-99	=				
	Name o	of Contact Person	Area Code	Day	time Telephone Number				
Div Reg P.O	ision of Corporations sistration Section Box 6327 lahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ceutive Center Circle see, FL 32301				
	a check for the follow \$125.00 Filing Fee	ing amount: □ \$130.00 Filing Fee & Certificate of Status	■ \$155.00 Filin Certified Copy		☐ \$160.00 Filing Fee, C of Status & Certified Co				

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Skehana Systems LLC (Name of Foreign	Limited Liability Company; must include "Li	mited Liabili	ty Company," "L.L.C.," or "LLC.")	
/If name unavailable enter alternate n	ame adopted for the purpose of transacting business	in Florida The	altern its name must include "Limited Lish	ilus Company " " 1 C " or "11 C ")
	and adopted for the purpose of transacting outsidess			my company, to be, or but ,
2. Connecticut	high foreign limited liability company is organized)	_ 3	. 82-0547667	er, if applicable)
(241)241010111111111111111111111111111111			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4. August 10th 2018				^
	(Date first transacted business in Florida, il pri (See sections 605,0904 & 605,0905, F.S. to de	or to registration etermine penalty	n) : liability)	
5. One Kimberly Drive		6	One Kimberly Drive	下原 声 型
(Street Address of)	Principal Office)	Ο.	(Mailing Addr	ess)
Brookfield, CT 06804			Brookfield, CT 06804	<u> </u>
				Q 0
				200
7. Name and street address	ss of Florida registered agent: (P.O.	Box NOT	accentable)	135. 7
Transcand <u>Meeradare</u>	-	<u></u>	acceptancie)	
Name:	Blum & Blum CA			<i>*</i>
Office Address:	5511 N University Dr Suite 101			
Office Address.	•			
	Coral Springs		Florida 33067 (Zip code	
Registered agent's accep	(City)		(Zip code	·)
	My Mil	ent's signature		<u> </u>
	(110)	em i ngomine,		
	acity and address of the person(s) wh			
Title or Capacity:	Name and Address:	<u>1</u>	itle or Capacity:	Name and Address:
Founder	Jeff Wainwright			
	One Kimberly Drive			
	Brookfield, CT 06804			
	<u> </u>			
(Use attachments if neces	atom (1			
(Ose attachments if neces	sary)			
	of existence, no more than 90 days of			
	of which it is organized. (If the certif	ficate is in	a foreign language, a translati	on of the certificate under oath
of the translator must be s	uomittea)			
	uted in accordance with section 605.65 the Department of State constitutes			
		_		
	Jeffray U.	anwig	torized person	
	,		•	
	Jeffrey E. Wainwright			
		ped or printed n	ame of signee	

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

SKEHANA SYSTEMS LLC

a domestic limited liability company, were filed in this office on June 10, 2002.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

emin Menk

Date Issued: August 10, 2018