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SECRETARY OF STATE
AND ASSEE FLORED.

N CULLIGAM

OCT 2 9 2018

COVER LETTER

TO: Registration Section

Division of Corporations	
Attune Agriculture LLC SUBJECT:	
	Name of Limited Liability Company
	ability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this r	natter to the following:
Maureen Akins	
	Name of Person
Attune Agriculture LLC	
	Firm/Company
751 Park of Commerce Drive, S	Suite 106
	Address
Boca Raton, Florida 33487	
	City/State and Zip Code
makins@attuneag.com	
E-mail address	:: (to be used for future annual report notification)
For further information concerning this matter, ple	ease call:
Maureen Akins	561 570-1792 at ()
Name of Contact Person	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{align*} \begin{align*} \be	



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 27, 2018

MAUREEN ATKINS 751 PARK OF COMMERCE DRIVE, SUITE 106 BOCA RATON, FL 33487

SUBJECT: ATTUNE AGRICULTURE LLC

Ref. Number: W18000077306

We have received your document for ATTUNE AGRICULTURE LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II

Letter Number: 218A00017759

FEIN: 475665943

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, TRIE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

rlt'n	ame unavailable, enter alternate n	ame adopted for the purpose of transacting business	in Florida. The alternate name mu	ist include "Limited Lial	bility Company," "L L.C." or "LEC ")
	State of Maryland		3 47-56659-		,,,
۷٠_	(Jurisdiction under the law of w	high foreign limited liability company is organized)			per, if applicable)
	July 2, 2018				
4.	July 2, 2018	(Date first transacted business in Florida, it pi	rior to registration (<u> </u>
	71.0 1 60	(See sections 605 0904 & 605 0905, F.S. to c		36	
5.	751 Park of Commerce		6. /51 Park o	of Commerce Dri	
	Suite 106		Suite 106		NEC. 18.
	Boca Raton, Florida 33	3487	Boca Rator	n. Florida 33487	2 二
	- 				
7.	Name and <u>street addres</u>	ss of Florida registered agent: (P.O.	Box NOT acceptable)		26 P ARY D ASSEE
	Name:	Maureen Akins			PM 12: 46
		751 0-1 -20 0.1 -0.1	107		9:1
	Office Address:	751 Park of Commerce Drive, Sui	te 106		5
		Boca Raton	. Fle	orida <u>33487</u>	
		(City)		(Zip code	
Ha des to c	ignated in this applica comply with the provisi	•	ent as registered agent o opez and complete perf	ve stated limited and agree to act	liability company at the place in this capacity. I further agre
Ha des to c and	ving been named as re ignated in this applica comply with the provisi Luccept the obligation	tance: gistered agent and to accept service tion, I hereby accept the appointme ions of all statutes relative to the pro s of my position as registered agent (Registered a	ent as registered agent a oper and complete perfo i. keta signature)	ve stated limited and agree to act formance of my (liability company at the place in this capacity. I further agre
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Typed or printed name of signee

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES. OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ATTUNE AGRICULTURE LLC (W16889107), REGISTERED NOVEMBER 19, 2015, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS OCTOBER 17, 2018.

Michael L. Higgs

Director



301 West Preston Street. Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

Online Certificate Authentication Code: Xf_lcvGxP02b6Dd0T9Hcbg To verify the Authentication Code, visit http://dat.maryland.gov/verify