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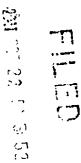
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COVER LETTER

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	istration Section ision of Corporation	ns			
SUBJECT:	OBSIDIA	INLLC			_
		Name of	Limited Liability Company		
		reign Limited Liability Comp ed to register the above refer			
Please return	all correspondence	concerning this matter to the	following:		
		Bryan Sw	izer		_
		N	ame of Person		
		OBSIDIANLLO			_
		F	irm/Company		
	/	O Oceancrest	Orive Ormand	Beach	[13] [14]
			Address		()
	_	Ormand by the	Sea FL 3	2176	22
		City/S	tate and Zip Code		7
		OBSIDIAN	LLC a comcA d for future annual report no	ST. NET	ပ္ က
		E-mail address: (to be use	d for future annual report no	otification)	1.7) TQJ
For further in	nformation concerning	g this matter, please call:			
	Bryan	1 Suizer	at (<u>304</u>) 6	77-4780	
	Name o	of Contact Person	Area Code Da	ytime Telephone Number	
Div Reg P.O	ision of Corporations gistration Section Box 6327 lahassee, FL 32314		Division Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ation Section Building secutive Center Circle ssee, FL 32301	
	a check for the follow \$125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	\$160.00 Fiting Fee, of Status & Certified C	

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: OBSIDIAN LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.,") OBSIDIAN DYNAMICLLC OBSIDIAN DYNAMICALCO
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.I. C," or "LLC.") State of West Virginia
(Jurisdiction under the law of which foreign limited hability company is organized) (Date first transacted business in Florida, if prior to registration) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 10 occancrest Drive

Ormand by the Sea . Florida 3:2176
(City) (Zip code) Office Address: 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 statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Name and Address: Title or Capacity: (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.



I, Mac Warner, Secretary of State of the State of West Virginia, hereby certify that

OBSIDIAN LLC

made application to the West Virginia Secretary of State's Office to be a registered limited liability company in the State of West Virginia on April 04, 2017. The application was received and found to conform to law.

The company is filed as an at-will company, for an indefinite period.

I further certify that the company has not been revoked or administratively dissolved by the State of West Virginia nor has the West Virginia Secretary of State issued a Certificate of Cancellation or Termination to the company.

Accordingly, I hereby issue this Certificate of Existence

CERTIFICATE OF EXISTENCE

Validation ID:5WV2W_CQ2HK

Given under my hand and the Great Seal of the State of West Virginia on this day of

October 15, 2018

Mac Warner

Secretary of State