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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

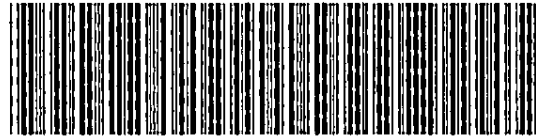
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2019 JAN - 7 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hippi NV, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Philip Chesson
Name of Person

Naha Kama LLC
Firm/Company

2260 5th Ave S, Suite 9
Address

St Petersburg FL 33712
City/State and Zip Code

Pchesson@nahakama.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Philip Chesson at (727) 744-3999
Name of Contact Person Area Code Daytime Telephone Number

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:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. Hippi LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Hippi NV 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 "LLC.")

2. Nevada
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 83-2326399
(FEI number, if applicable)

4. N/A - New LLC - Has not started business
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2260 5th Ave S, Suite 9
(Street Address of Principal Office)

6. 2260 5th Ave S, Suite 9
(Mailing Address)

St Petersburg FL 33712
33712

St Petersburg FL 33712

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Scott L. Rowan

Office Address: 2260 5th Ave S, Suite 9

St Petersburg, Florida 33712
(City) (Zip code)

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.

S. L. Rowan
(Registered agent's signature)

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TALLAHASSEE, FLORIDA

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:

13K Naha Kama LLC 2260 5th Ave S, Suite 9
St Petersburg, FL 33712

BR William Nicholson 121 N. Post Lane, Suite 2105
Houston, TX 77024

3K Mikel Anderson 2260 5th Ave S, Suite 9
St Petersburg, FL 33712

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(See attachments if necessary)

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 by a translator must be submitted)

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.

Philip Chesson as Mgr, A.R. of Naha Kama, LLC
Signature of an authorized person

Philip Chesson as Mgr, A.R. of Naha Kama, LLC
Typed or printed name of signee

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HIPPI, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 24, 2018, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 26, 2018.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Certified By: Heather Christensen
Certificate Number: C20181226-0946