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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SURMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Transform SR Protection LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, once alternate name adopted for the purpose of nemacing business in Florida. The alternate rame must include "Limited Liability Company," "L.L.C," or "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI manuber, it applicable) Upon Qualification (Date first transacted burkness in Florida, if prior to registration (See sections 605,0904 & 603,0905, F.S. to determine pennity 5. 1170 Kane Concourse, Suite 200 6. Same (Street Address of Principal Office) (Mailing Address) Bay Harbor Islands, FL 33154 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Ţ. C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation , Florida <u>33324</u> (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. By: C T Corporation System Assistant Secretary (Registered agent //signature) 8. The name, title or capacity and address of the person(s) who has/have authority to monage is/are: Title or Capacity: Title or Capacity; Name and Address: Name and Address: TRANSFORM SR LLC MEMBER 1:70 Kane Concourse, Suite 200 Bay Harbor Islands, FL 33154 (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) () I orida Statutes. I am aware that any false information felony as provided for in s.817.155, F.S. submitted in a document to the Department of State constitutes a third defice Siegan an authorized person

Kurz

Tyled or printed name of signed

Jenn

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "TRANSFORM SR PROTECTION 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 FIFTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

2019 FEB 13 A 6:59

Authentic

Authentication: 202203837

Date: 02-05-19

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