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(ке	questor's Name)	
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### COVER LETTER

TO: Registration Section

Divi	ision of Corporations					
elib lezze.	Cypress Real Estate, LL	С				
SUBJECT:	<del></del>	Name of Lim	ited Liability	Company		
				ation to Transact Business in Flori ited liability company to transact b		
Please return	all correspondence conc	erning this matter to the foll	owing:			
	Jonathan Krummel					
		Name	of Person		2013	· •
	Cypress Real Estate	, LLC				ا ا سر سر
		Firm/	Company		. 3 .	1
	7005 N Robinson A	venue			-0	ン
		Α	ddress	······································	<del></del>	
	Oklahoma City, Ok	73116			,	
		City/State	and Zip Code	· · · · · · · · · · · · · · · · · · ·	<del></del>	
	JKrummel@Cypress	REOK.com				
	E	nail address: (to be used fo	r future annua	l report notification)		
For further in	formation concerning thi	s matter, please call:				
Jon	athan Krummel	a	918 t (	261-4664		
<del></del>	Name of Co	ntact Person	Area Code	Daytime Telephone Number	<del></del> er	
Divi Reg P.O.	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	losed is a check for the forse make check payable to	Howing amount: b: FLORIDA DEPARTMI	ENT OF STA	ТЕ		
	_	S130.00 Filing Fee & Certificate of Status	\$155.00	Filing Fee & S160.00 Fili	ng Fee, Certific Certified Copy	cate

## 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:

homa sdiction under the law of w		83-1934049	
asdiction under the law of w	hich foreign limited liability company is organized)	3. (FEI number, if appli	
	mich foreign imsted imbitity company is organized)	(FEI number, it appli	(200e) (200e) (200e) (200e) (200e) (200e)
<u> </u>	(Date first transacted business in Florids, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine	gistration.)  penalty liability)	در ز
05 N Robinson Ave	enue	7005 N Robinson Avenue	- 1 - 1
(Street Address of	Principal Office)	6. (Mailing Address)	
dahoma City, OK 7.			
	ss of Florida registered agent: (P.O. Box )	Oklahoma City, OK 73116  NOT_acceptable)	
		NOT acceptable)	<u></u>
me and street addres	ss of Florida registered agent: (P.O. Box )	NOT acceptable)	3
me and street addres	ss of Florida registered agent: (P.O. Box )  John Krummel  168 Valenza Loop	NOT acceptable)	3

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: Name: \_\_\_ Jonathan Krummel Name: Manager Manager Address: \_\_\_\_ 7005 N Robinson Ave 7005 N Robinson Ave Member Address: ■ Member Oklahoma City, OK 73116 Oklahoma City, OK 73116 ☐ Authorized Authorized Person Person Other\_\_\_\_\_ Other Other Other Manager Manager Name: ☐ Member ☐ Member Address: \_\_\_\_\_ Authorized ☐ Authorized Person Person Other\_\_\_ Other\_\_\_\_\_ Other Other Manager Name: Name: Member Address: Member Address: Authorized Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ Other Other\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. anal de Jonathan Krummel

Typed or printed name of signee

#### OFFICE OF THE SECRETARY OF STATE



## CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, ado hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that CYPRESS REAL ESTATE, LLC whose registered agent is JONATHAN KRUMMEL, with its registered office at 15304 KESTRAL. <u>LAKE DRIVE\_EDMOND 73013\_USA Oklahoma is a Domestic Limited Liability</u> Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 13th, day of December, *2018.* 

Secretary Of State

Jem Hullamin