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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 690325 8261896

AUTHORIZATION :

COST LIMIT : \$'A30.00

ORDER DATE: March 19, 2019

ORDER TIME : 12:46 PM

ORDER NO. : 690325-005

CUSTOMER NO: 8261896

## FOREIGN FILINGS

NAME: NOAH FISHERIES, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

## APPLICATION BY FOREIGN CIMITED GIABILETT COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA.

'N 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:

	, ,,	d Liability Company," "L.L.C.," or "LLC	)
name unavailable, enter alternate nam	ne adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.")
Delaware		3	
(Junsdiction under the law of which	h foreign limited hability company is organized)	(FEI n	number, it applicable)
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration.) ne penalty liability)	<del></del>
10997 Ridgeline Ln		6. 10997 Ridgeline Ln	
(Street Address of Principal Office)		(Mailing Address)	
Spring Hill, FL 34608		Spring Hill, FL 34608	·····
<del></del>	of Florida registered agent: (P.O. Box Corporation Service Company	NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahassee	Florida 32301 (7.jp	
	(City)		code)
signated in this applicati comply with the provision and accept the obligations	istered agent and to accept service of points. I hereby accept the appointment and of all statutes relative to the proper	process for the above stated limi s registered agent and agree to a and complete performance of n	ited liability company at the place act in this capacity. I further agree ny duties, and I am familiar with
aving been named as reg signated in this applicati comply with the provision ad accept the obligations	istered agent and to accept service of points. I hereby accept the appointment and of all statutes relative to the proper	process for the above stated limi s registered agent and agree to t	ited liability company at the place act in this capacity. I further agree ny duties, and I am familiar with
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aving been named as reg signated in this application comply with the provision accept the obligations.  The name, title or capace Title or Capacity:  Member  Member  Jse attachments if necessary attached is a certificate of the capacity.	istered agent and to accept service of fon, I hereby accept the appointment and so fall statutes relative to the proper of my position as registered agent.  Corporation Service Company By:  (Registered agent)  (Registered agen	concess for the above stated limits registered agent and agree to a and complete performance of notice and complete performance and complete performance and complete performance of notice and complete performance and complete performanc	e:  Name and Address:  Name and Address:

Typed or printed name of signee

Lee Burgess, Member



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

DELAWARE, DO HEREBY CERTIFY "NOAH FISHERIES, 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 TWENTIETH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NOAH FISHERIES, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JANUARY, A.D. 2019.

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



Authentication: 202479154

Date: 03-20-19