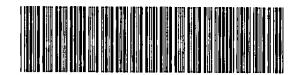
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| (Requ                       | iestor's Name)    |           |
|-----------------------------|-------------------|-----------|
| (Addr                       | ess)              |           |
| (Addr                       | ess)              |           |
| (City/s                     | State/Zip/Phone # | ¥)        |
| PICK-UP                     | ☐ WAIT            | MAIL      |
| (Busin                      | ness Entity Name  | e)        |
| (Docu                       | ment Number)      |           |
| Certified Copies            | Certificates of   | of Status |
| Special Instructions to Fil | ing Officer:      |           |
|                             |                   |           |
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SECRETANY OF STATE ALLAHASSEE, FLORIDA

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### COVER LETTER

Registration Section

| Divis                  | ion of Corporations   |                        |             |   |   |             |
|------------------------|---|------------------------|-------------|---|---|-------------|
| •                      | Outcome Engenuity, LLC  |                        |             |   |   |             |
| SUBJECT:               | <del></del>   | Name of Limited        | l Liability | : Company   |   |             |
|                        | "Application by Foreign Limited L<br>I check are submitted to register th                 |                        |             |   |   |             |
| Please return a        | all correspondence concerning this  | matter to the follow   | ing:        |   |   |             |
|                        | Dawne Marx  |                        |             |   |   |             |
|                        | <del></del>   | Name of                | Person      |   |   |             |
|                        | Outcome Engenuity, LLC  |                        |             |   | . ~   |             |
|                        | Firm/Company  |                        |             |   |   |             |
|                        | 5048 Tennyson Pkwy, Suite 2   | 50                     |             |   | 2019 APR -1 PH 2: 39 BECKLTAGA OF STATE TALLAHASSEE. FLORID | <u>n</u> =  |
|                        |   | Addr                   | ess         |   | 13SE -  | ر آساء<br>ا |
|                        | Plano, TX 75024   |                        |             |   | PH 2  |             |
|                        |   | City/State and         | l Zip Coc   | le  | BE 33   |             |
|                        | dawnemarx@gmail.com   |                        |             |   | Dri D   |             |
|                        | E-mail addre  | ss: (to be used for fu | ture annu   | al report notification)   |   |             |
| For further int        | ormation concerning this matter, p  | dease call:            |             |   |   |             |
| Daw                    | ne Marx   | 1                      | 169         | 222-6517  |   |             |
|                        |   | at (                   |             | )   |   |             |
|                        | Name of Contact Pers  | on .                   | Area Cod    | le Daytime Telephone ?  | Number  |             |
| Divis<br>Regis<br>P.O. | LING ADDRESS:<br>sion of Corporations<br>stration Section<br>Box 6327<br>hassee, FL 32314 |                        |             | STREET ADDRESS:<br>Division of Corporations<br>Registration Section<br>Clifton Building<br>2661 Executive Center Cir<br>Tallahassee, FL 32301 | rcle  |             |
| Pleas                  | -   |                        | 3155.0      | 00 Filing Fee & 🛮 🛛 \$160.0   | 00 Filing Fee, Certificat<br>tus & Certified Copy           | l¢          |

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

| Outcome Engenuity, L.  |   |   |   |                         |
|--|---|---|---|-------------------------|
| (Name of Foreign   | Limited Liability Company, must include "Limit  | ed Liability Company," "                  | L L.C ," of "LLC.")   |                         |
|  |   |   |   |                         |
|  | name adopted for the purpose of transacting business in Flo   |   |   | ny,""L.L C," or "LLC.") |
| Гexas  |   | 04-372145                                 | 55  |                         |
| (Jurisdiction under the law of w   | thich foreign limited liability company is organized)   | 3   | (FEI number, if applica   | ble)                    |
|  |   |   | 7   | 7019 APR                |
| March 4, 2019  |   |   |   | 5 5                     |
|  | (Date first transported business in Florida, if prior to  | PRINCIPALIAN )                            | <u>`</u>  | P -                     |
|  | (Date first transacted business in Florida, if prior to<br>(See sections 605 0904 & 605,0905, F.S. to determ  | tine penalty liability)                   | D C   | 5 ~ T                   |
| 5048 Tennyson Pkwy.  | Suite 250   | same                                      | S   | 之 - n                   |
| (Street Address of   | Principal ()Hige)   | 6   | (Mailing Address)   | <del></del>             |
| Plano, TX 75013  | (Therpat Stace)   |   | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                                 | Pu. 2                   |
| riano, 1 x 75015   |   |   | (   | R22 <b>デ</b>            |
|  |   |   |   |                         |
|  |   |   |   | $\mathcal{V}$           |
|  |   |   |   |                         |
|  |   |   |   |                         |
| Name and street addres   | ss of Florida registered agent: (P.O. Box   | NOT acceptable)                           |   |                         |
| . vanie and <u>street addre.</u>   | E of Fronta regimered agent. (Front too.  | ( AND The Copialists)                     |   |                         |
|  | Dawne Marx  |   |   |                         |
| Name:  |   |   |   |                         |
| rvame:   |   |   |   |                         |
|  | 100 1 1 21 1 1001   |   |   |                         |
|  | 133 Isle of Venice, #201  |   |   |                         |
| Office Address:  | 133 Isle of Venice, #201  |   |   |                         |
| Office Address:  | 133 Isle of Venice, #201  Ft. Lauderdale  |   | 33301   | ,                       |
| Office Address:  | Ft. Lauderdale  | Flo                                       | rida  | ·                       |
| Office Address:  |   | Flo                                       |   | •                       |
|  | Ft. Lauderdale (City)   | . Flo                                     | rida  | ·                       |
| gistered agent's accep   | Ft. Lauderdale (City)   |   | orida(Zip code)   | company at the p        |
| gistered agent's accep<br>ving been named as re  | Ft. Lauderdale (City)  ptance: egistered agent and to accept service of   | process for the abov                      | rida(Zip code)  ve stated limited liability                             |                         |
| gistered agent's accep<br>ving been named as re<br>ignated in this applica<br>comply with the provis.  | Ft. Lauderdale  (City)  Stance:  registered agent and to accept service of the appointment of the control of the proper ions of all statutes relative to the proper                             | process for the abovis registered agent a | rida(Zip code)  ve stated limited liability and agree to act in this co | apacity. I further      |
| gistered agent's acceptioning been named as resignated in this applicationally with the provisi  | Ft. Lauderdale  (City)  ptance: gistered agent and to accept service of ation, I hereby accept the appointment of   | process for the abovis registered agent a | rida(Zip code)  ve stated limited liability and agree to act in this co | apacity. I further      |
| gistered agent's accep<br>ving been named as re<br>ignated in this applica<br>comply with the provis.  | Ft. Lauderdale  (City)  Stance:  registered agent and to accept service of attion, I hereby accept the appointment of the statutes relative to the proper s of my position as registered agent. | process for the abovis registered agent a | rida(Zip code)  ve stated limited liability and agree to act in this co | apacity. I further      |
| egistered agent's acceptiving been named as resignated in this application of the provision | Ft. Lauderdale  (City)  Stance:  registered agent and to accept service of the appointment of the control of the proper ions of all statutes relative to the proper                             | process for the abovis registered agent a | rida(Zip code)  ve stated limited liability and agree to act in this co | apacity. I further      |

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: Name and Address: Title or Capacity: Title or Capacity: David Marx Dawne Marx Manager Manager Name: Manager Name: 904 Thornbury Ct. 904 Thornbury Ct. Member Member | Address: \_\_\_\_ Address: \_\_ Allen, TX 75013 Allen, TX 75013 Authorized Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ Other\_ Other Name: \_\_\_\_\_\_ Manager Manager Manager Member Member | Address: \_\_\_\_\_ Address: \_\_\_ Authorized Authorized Person Person Other\_\_\_\_ Other\_ Other\_ Manager Name: \_\_\_\_\_\_ Manager Manager Name: Member Address: \_\_\_\_\_ 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. Signature of an authorized person Dawne Marx

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



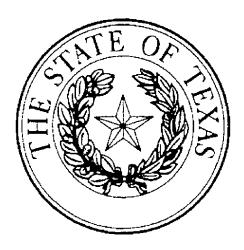
## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for OUTCOME ENGENUITY, LLC (file number 800525735), a Domestic Limited Liability Company (LLC), was filed in this office on August 01, 2005.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 26, 2019.



David Whitley Secretary of State