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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Lea M 10 dug G LC 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: Theder de Chelly
Name of Pérson
Firm/Company
1005 WAVERLY Vol.
TAILA hASSEE, FL 323/2
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Fred Chelly at (561) 573-496/ Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE
S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status Certified Copy 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	'G IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
1. Reach Holdings LLC (Name of Foreign Limited Liability Company) must include "Limited Liability	Company " "I I C " or "I I C ")
(Name of Poletgi Annied Liability Company; must include Liability	Company, E.E.C., Or 122C, J
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alt	ernate name must include "Limited Liability Company," "L.L.C," or "LLC")
2. (Jurisdiction under the law of which Threign limited liability company is organized) 3.	(FEI number, if applicable)
4. (Date first transacted business in Florida, if prior to registration (See sections 605 0904 & 605 0905; F.S. to determine penalty b	
5. 461 E. Byvd Ave - 6.	(Mailing Address)
Bonifacy FL	TALLAHASSEE FC
32425	32312
7. Name and <u>street address</u> of Florida registered agent; (P.O. Box <u>NOT</u> a	cceptable)
Tampari Oholler	११ कि जाता है। ११ कि जाता है।
Name: REDIFICE CALLY	
Name: FREDERICK Chelly Office Address: 1605 Waverly rd	
TAllAh ASSEE	, Florida 32312 = .
	, Florida 32312 = .
Registered agent's acceptance: Having been named as registered agent and to accept service of process f	
designated in this application, I hereby accept the appointment as registe to comply with the provisions of all statutes relative to the proper and con	red agent and agree to act in this capacity. I further agree
and accept the obligations of my position as registered agent.	The perfermence of my unites, and I am juminity with
TA M	0
(Registered agent's signature)	

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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: FRERERICK Chelly	☐ Manager	Name: Barry Coonce
Member	Address: 1005 waverly Val	Member	Address: 17228 18th Aue S.
Authorized	TALLAHASSEE, FL	Authorized	Spanaway, WA.
Person	32312	Person	98387
Other	Other	Other	Other
Manager	Name:	——————————————————————————————————————	Name:
Member	Address:	☐ Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other
			2 a 155
Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized		☐ Authorized	
Person	<u>/</u>	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. Non-indexed 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.

TREDERICE Chely Wanazing Member
Typed or printed name of signee

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Reach Holdings LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **March 29, 2018**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2018-000796249**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 28th day of March, 2019 at 8:55 AM. This certificate is assigned 030458026.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.