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(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W19-31090					

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2019

MICHAEL ROSS 1301 S.W. 10TH AVE, APT G 206 DELRAY BEACH, FL 33444

SUBJECT: ON THE REBOUND LLC Ref. Number: W19000031090

We have received your document for ON THE REBOUND LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 219A00006135

Deborah Bruce Corporate Records Supervisor

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE		EBOUND LL f Limited Liability Company	<u> </u>				
The end Existen	losed "Application by Foreign Limited Liability Conce, and check are submitted to register the above refe	npany for Authorization to Trenced foreign limited liabili	ransact Business in Florida," ty company to transact busine	Certificate ess in Flori	oi da		
Please r	eturn all correspondence concerning this matter to the	e following:					
	Michael	Ross Name of Person	·				
	7	Name of Person					
ON The Reboond LLC							
Firm/Company							
1301 S.W. 10th Ave Apt 6 206							
		å ddrocc					
Del Ray Beach Fl 33444 City/State and Zip Code							
City/State and Zip Code							
E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification)							
For furt	ner information concerning this matter, please call:		2 7515 F	R 26	36. 36.		
	Michael Ross	at 760 \ 67	7 75/5	3 [ì		
	Michael Ross Name of Contact Person MAILING ADDRESS:	Area Code Day	time Telephone Number	平 : 34	.		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, Fl. 32314	Division Registrat Clifton F 2661 Exc	of Corporations ion Section	(4) 45**			
Enclosed	is a check for the following amount: S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy				

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

COMPANYTO TRANSACT BU	THUN BIOLOGIA, FLORIDA STATUTES, THE FOL ISINESS INTHE STATE OF FLORIDA:	ILOWING IS SUBMITTED TO REGIST	'ER A FORFIGN LIMITED LIABILITY
ı. O',	NThe REGOUND L	LC	
(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC."	}
a NAVA	name adopted for the purpose of transacting business in Floric PDA hich foreign limited liability company is organized)	ta. The alternate name must include "Limited Lia 3	-
4	(Date first transacted business in Florida if areas and	uiseen (See)	
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	ponalty liability)	19th prend 6 2
	Principal Office) W-10+1 AVC POT 6 206 BCACH F1 33444	6. 150 5, W. (Mading Add	10th ANCAPT 6 201 ress) eAch
	15/16/11/2011	- 71. 25.	177
7. Name and street address	ss of Florida registered agent: (P.O. Box)		
Name:	JAMES STRA	556URL	
Office Address:	119 ORCHARD R BOCA RATON	idge W.	- 1
	BOCA PATON	, Florida	43/2 2
designated in this applicate to comply with the provision	tance: gistered agent and to accept service of priction, I hereby accept the appointment as tons of all statutes relative to the proper as of my position as registered agent. (Registered agent's sign	ocess for the above stated limited registered agent and agree to act nd complete performance of my to add to	liability company at the place
8. The name, title or capa	city and address of the person(s) who has/		
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
OWNER	MICHAEL KOSS 130 SW 1091 AC Del PAT BEACLE 3	Sole HER MANYER 13444	100 /0
(Use attachments if necess	eary)		
9. Attached is a certificate of jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, du of which it is organized. (If the certificate is bmitted)	ly authenticated by the official has s in a foreign language, a translati	ving custody of records in the on of the certificate under oath
10. This document is execusubmitted in a document to	the Department of State constitutes a third	l) (b), Florida Statutes. I am aware degree felony as provided for in s	that any false information .817.155, F.S.
	Michael Typed or pri	nted name of signee	

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ON THE REBOUND LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 9, 2019, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 19, 2019.

Lauhara K. Cegarste

Barbara K. Cegavske Secretary of State

Electronic Certificate

Certificate Number: C20190419-0119