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April 12, 2019

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: *Mis Mary's Holdings, LLC*
Certificate of Good Standing
Application by Foreign LLC

To Whom This May Concern:

Please find enclosed with this letter an original Certificate of Good Standing from the Wyoming Secretary of State for Mis Mary's Holdings Wyoming, LLC.

Please note, despite our request for the same, the Wyoming Secretary of State does not currently offer certified, embossed or gold stamped Certificates of Status. They have indicated to our office that when the person serving as Secretary of State is replaced with a new officer, all of their embossed certificates are disposed of, and in the interim, the original color documents we have enclosed with this letter serve as the replacements for the embossed documents. I have enclosed our correspondence with their office so that you may view what we requested, and what was received in return. As such, we appreciate your accepting it as an original certificate of status and evidence of the LLC's existence in Wyoming.

In addition, I have enclosed the application by foreign LLC for authorization to transact business in Florida, along with check #6092 totaling \$130.00.

If you require anything further, please contact our office at (239) 418-0169.

Sincerely,

Kara A. Sajdak, Esq.

enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mis Mary's Holdings, LLC
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:

Erica D. Johnson, Esq.
Name of Person

The Dorsey Law Firm, PLLC
Firm/Company

10181-C Six Mile Cypress Pkwy
Address

Fort Myers, FL 33906
City/State and Zip Code

erica@dorseylaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erica Johnson at (239) 418-0169
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate 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 IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Mis Mary's Holdings, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Wyoming
(Jurisdiction under the law of which foreign 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 liability)

5. _____
(Street Address of Principal Office)

6. _____
(Mailing Address)

1297 Barrett Road

1000 SE 21st Place

N. Ft. Myers, FL 33903

Cape Coral, FL 33910

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: DLF Registered Agent Service, LLC

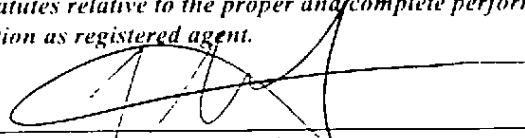
Office Address: 11581 -C Six Mile Cypress Pkwy

Ft. Myers Florida 33906
(City) (Zip code)

2018 11 06 11:06 AM

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(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: Manager Name: Mary E. Wildman
 Member Address: 1000 SE 21st Pl.
 Authorized Cape Coral, FL 33990
 Person _____
 Other _____ Other _____

Title or Capacity: Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

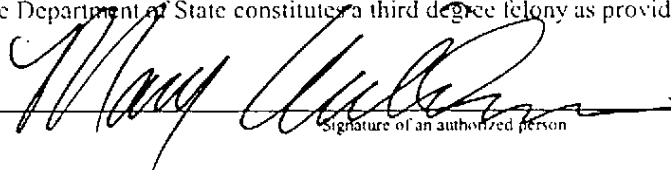
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 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.



 Signature of an authorized person

PAID PERMIT NO. 113 9:02

State of Wyoming

Office of the Secretary of State



United States of America, }
State of Wyoming } ss.

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

Mis Mary's Holdings, LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **March 6, 2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2019-00084755**.

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 22nd day of March, 2019 at 11:25 AM.



Edward A. Buchanan

Secretary of State

By *Rosalie Gonzales*

Rosalie Gonzales