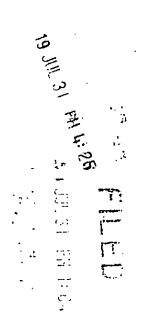
M900007379

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Stati	us
Special Instructions to Filing Officer:	

Office Use Only



000332557380



Z BROWN AUG 0 1 2019



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	07/31/2019		
Name:	Merritt Walke	er	
Reference #	#:111359	6	
		IILLET HOLDINGS, LLC	<u> </u>
✓ Articl	les of Incorporation/Au	thorization to Transact Busine	SS
Ame	ndment		
☐ Char	nge of Agent		
Rein	statement		
☐ Conv	version		
☐ Merg	er		
Disso	olution/Withdrawal		
☐ Fictit	ious Name		
Othe	r		
Authorized A	Amount:\$	125	
Signature:	CH.	<i>(</i> ,)	

F: 800.944.6607

COVER LETTER

Registration Section

TO:

.

UBJECT:	Name of Limi	ted Liability (Company	
ne enclosed "Application by Foreixistence, and check are submitted	ign Limited Liability Company to register the above reference	for Authoriza d foreign limi	ation to Transact Business in Floric ted liability company to transact bu	da," Certificate of usiness in Florida.
ease return all correspondence co	ncerning this matter to the follow	owing:		
Brian C. Bednar				
	Name	of Person		_
Millet Holdings,	LLC			
	Firm/0	Company	-	
1125 E. Morehea	ad Street, Suite 202			
	Ac	idress		
Charlotte, NC 28	3204			
	City/State	and Zip Code		
team@birdseyeend				
	E-mail address: (to be used for	future annua	report notification)	_ _
or further information concerning	this matter, please call:			
Brian C. Bednar	at	704 (644-7733	
Name of	Contact Person	Area Code	Daytime Telephone Numbe	T
MAILING ADDRESS: Division of Corporations			STREET ADDRESS: Division of Corporations	
Registration Section P.O. Box 6327			Registration Section Clifton Building	
Tallahassee, FL 32314			2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the Please make check payable	e following amount: e to: FLORIDA DEPARTME	NT OF STA	TE	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		-	ng Fee, Certificate 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:

Millet Holdings, LLC	Limited Liability Company; must include "Limit		25 1 2 2 3 and 12 25		_	
(Name of Foreign	Lamited Liability Company; must include "Lamit	ed Liability Con	ipany, L.L.C., or LLC.)			
name un ivailable, enter alternate na	ame adopted for the purpose of transacting business in Fl	onda. The alternate	name must include "Limited Liability	Company," "L.L.C," or "LL	,	
North Carolina		3	(FEI number,)		_	
(Jurisdiction under the law of wh	nch foreign limited hability company is organized)		(FEI number,)	t applicable)		
August 2, 2019						
	(Date first transacted business in Florida, if prior to (See sections 605-0901 & 605-0905, F.S. to deter-	o registration) mne penalty liability	3)			
H25 E. Morehead Street, Suite 202		6.	5 E. Morchead Street, Suit	e 202		
(Street Address of F	rincipal (Hice)	0	(Mailing Address)	(Mailing Address)		
Charlotte, NC 28204		Cha	rlotte, NC 28204		_	
				·· չ		
·	······································					
Name and street addres	<u>s</u> of Florida registered agent: (P.O. Bo	x <u>NOT</u> accep	otable)		•	
Name:	COGENCY GLOBAL INC.			1 51 TT		
Office Address:	115 North Calhoun Street, Suite 4			*** TT		
	Tallahassee		32301 , Florida			
	(City)		(Zip code)			

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 signatures

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: Name: Brian C. Bednar Name: _____ Manager Manager | Address: ____ 1125 E. Morehead St., Ste. 202 Member Member Address: Charlotte, NC 28204 ☐ Authorized Authorized Person Person Other____ Other____ Other Other Name: _____ Manager Manager Manager Name: _____ Address: Member Address: Member Authorized Authorized Person Person Other____ Other Other_ Manager Manager Member ☐ 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. 1 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 Brian C. Bednar

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

MILLET HOLDINGS, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 17th day of May, 2017

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 31st day of July, 2019.

Elaine J. Marshall

Secretary of State