

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
ICONIC IT LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Iconic IT LLC, a Delaware Corporation

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:

David Loeper

Name of Person

Iconic IT LLC

Firm/Company

2350 Airport Freeway Suite 300

Address

Bedford, TX 76022

City/State and Zip Code

Dloeper@iconicit.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matt Zucker

at (214) 740-4030

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. Iconic IT LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")
2. Delaware 3. 83-4532130
(Jurisdiction under the law of which foreign limited liability company is organized) (EIN number, if applicable)
4. 9/1/2019
(Date first commenced business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)
5. 28200 Old 41 Road Unit 208 6. 2350 Airport Freeway Suite 300
(Street Address of Principal Office) (Mailing Address)
- Bonita Springs, Florida 34135 Bedford, TX 76022

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

Name: Matthew Fowler

Office Address: 310 Grove Park Dr

Niceville, Florida 32578
(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.

Matthew Fowler

(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:**

☐ Manager Name: Mike Fowler
☒ Member Address: 30 Dickenson Crossing
☐ Authorized Fairport, NY 14450
Person
☐ Other ☐ Other

☐ Manager Name: Jeff Howard
☒ Member Address: 1300 Broadmoor Lane
☐ Authorized Irving, TX 75061
Person
☐ Other ☐ Other

☐ Manager Name: Chris Hoose
☒ Member Address: 757 N. St. Andrews Dr
☐ Authorized Wichita, KS 67230
Person
☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: Sitima Fowler
☒ Member Address: 30 Dickenson Crossing
☐ Authorized Fairport, NY 14450
Person
☐ Other ☐ Other

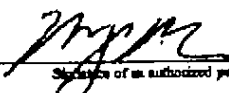
☐ Manager Name: Nick Nyberg
☒ Member Address: 16319 W. 84th Dr.
☐ Authorized Arvada, CO 80007
Person
☐ Other ☐ Other

☐ Manager Name: Anthony Miller
☒ Member Address: 5581 East Manfield Ave.
☐ Authorized Denver, CO 80237
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
Mike Fowler

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ICONIC IT LLC" IS DULY FORMED UNDER
THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE NINTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ICONIC IT LLC"
WAS FORMED ON THE FOURTH DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
ASSESSED TO DATE.

2019 SEP 13 PM 4:48
DELAWARE SECRETARY OF STATE



7359664 8300

SR# 20196436453

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line.

Authentication: 203383265

Date: 08-09-19

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