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To:

Division of Corporations

Fax Number : (850)617-6363

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : 120080000045 Phone : (302)645-7400 Fax Number : (302)645-1280

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

Email Address: lou013@protonmail.com

Foreign Limited Liability Company LRR Industries LLC

Certificate of Status	1
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WHITESECTION (05/002), FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. TAMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LRR Industries LLC (Name of Foreign L	mited Liability Company, must include "I muted I	, , ,		
ame unavailable, enter alternate na	me adopted for the purpose of transacting business in Flor	nda. The alternate nati	ie most include "Limited Fiability Comp.	my " 1 1, C," or 1,1 C
)elaware				
(Jurisdiction under the law of wh	ch foreign finated halmlity company (congrainzed)		d [] minber il applicat	4.1
02/12/2020				
	(Date first transacted business in Florida, if prior to re (See sections 60) (90) & 605 (90) F.S. to determine	gistration) e penalty liability)		
203 Flurst Court		4300 W	est Lake Mary Blvd	
cer Address of Principal Office)		Nla	ding Address	
Lake Mary, FL 32746		Suite 10	010 #356	
		Lake M	ary, FL 32746	
Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptab	ic)	2020 FIB I
Name:	Luis Raventos			
Office Address:	203 Hurst Comt			7.3
	Lake Mary		, Florida (Zip vinta)	03
	(City)		(Zqr) ody)	

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.

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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]:

Fitle or Capacity:	Name and Address:	Title or Capacity	<u> </u>	Name and Address:
□Manager	Name:	∏Manager	Name:	
■Member	Address: 203 Hurst Court	□Member	Address:	
□Authorized	Lake Mary, FL 32746	□Anthorized		
Person		Person		
Other		□Other		□Other
□Manager	Name:	⊒Manager	Name:	
□Member	Address:	™ember	Address:	
□Authorized		□Authorized		
Person		Person		
Other	□Other	□()ther	<u></u>	□Other 2020 F
□Manager	Name:	□Manager	Name:	<u> </u>
∐Member	Address:	□Member	Address: _	. :
□Authorized		□Authorized		
Person		Person		<u> </u>
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.

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LRR INDUSTRIES 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 FOURTEENTH DAY OF FEBRUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LRR INDUSTRIES LLC" WAS FORMED ON THE TWELFTH DAY OF FEBRUARY, A.D. 2020.

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

2020 FC3 14 CT 1: 03



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SR# 20201118726

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

Authentication: 202388570

Date: 02-14-20