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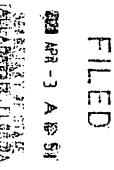
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(Re	questor's Name)	
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COVER LETTER

TO:	Registration Section Division of Corporations					
CIID I	HIRISE LLC					
SUBJ	osec1:	Name of Lin	nited Liability	Company		-
The er Existe	enclosed "Application by Foreign Limited Liab stence, and check are submitted to register the a	oility Company bove reference	y for Authoriz ed foreign lim	ation to Transact ited liability com	Business in Florida, pany to transact busi	" Certificate of ness in Florida.
Please	se return all correspondence concerning this ma	atter to the fol	lowing:			
	LOVETTE DOBSON					
		Name	of Person			-
		Firm	Company			-
	17350 STATE HWY 249 #220		· · · · · · · ·			
		A	ddress			•
	HOUSTON, TX 77064					
		City/State	and Zip Code	:		-
	EFILE1234@INCFILE.COM					
	E-mail address:	(to be used fo	r future annua	l report notificati	ion)	-
For fu	further information concerning this matter, plea	se call:				
	LOVETTE DOBSON	a	1 t (888-462-345.	3	
	Name of Contact Person		Area Code	Daytime 1	Telephone Number	•
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADI Division of Co Registration So Clifton Buildin 2661 Executive Tallahassee, FI	rporations ection g e Center Circle	
	Enclosed is a check for the following amount Please make check payable to: FLORIDA	DEPARTMI			— • • • • • • • • • • • • • • • • • • •	
	S125.00 Filing Fee \$130.00 F.	iling Fee & cate of Status		Filing Fee & ied Copy	S160.00 Filing of Status & Cer	

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. HIRISE LLC

(Name of Francia Limited Liability Company must include all inhility Company will L.C. You will C. You will contain the will be will b

701 00 100	me adopted for the purpose of transacting business in		84-4746746			
COLORADO	ich foreign limited liability company is organized)	. 3.		er, if applicable)		
(Million that it is in or in it	,					
	(Date Grey represented business in Florida, if orig	or to registratio	n.)			
	(Date first transacted business in Florida, if pric (See sections 605.0904 & 605.0905, F.S. to det	termine penalty				
2020 N ACADEMY BLVD, STE 261 #313		6.	2020 N ACADEMY BLVI	020 N ACADEMY BLVD, STE 261 #313 (Mailing Address)		
(Street Address of P	rincipal Office)	0.	(Mailing Add	ress)		
COLORADO SPRING	S, COLORADO 80909		COLORADO SPRINGS, C	COLORADO 80909		
				2000 800		
>1	a of Clarida registered agent: (P.O.)	Rox NOT	accentable)			
Name and street addres	ss of Florida registered agent: (P.O. l	Box <u>NOT</u>	_acceptable)			
Name and street address Name:	LEGALINC CORPORATE SERV			P -3		
		ICES INC). 	AB-3 AB		
Name:	LEGALINC CORPORATE SERV	ICES INC). 	MAN A D SI		

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: HEATHER HALL Manager Manager Manager Name: ____ 2020 N ACADEMY BLVD ■ Member Address: Member Address: STE 261 #313 Authorized Authorized COLORADO SPRINGS, CO 80909 Person Person Other_ Other Other Other DARREN HALL Manager Name: Manager Manager Name: ______ 2020 N ACADEMY BLVD ■ Member Address: ☐ Member Address: STE 261 #313 Authorized Authorized COLORADO SPRINGS, CO 80909 Person Person Other____ Other_ Other Other Manager Name: ____ Manager | Name: _____ Member Address: Member 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. 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 HEATHER HALL

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

HIRISE LLC

is a

Limited Liability Company

formed or registered on 02/17/2020 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20201144240.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/19/2020 that have been posted, and by documents delivered to this office electronically through 03/22/2020 @ 19:44:56.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/22/2020 @ 19:44:56 in accordance with applicable law. This certificate is assigned Confirmation Number 12162930



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/Certificate/SearchCriteria/do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."