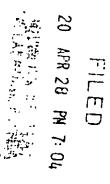
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(Reque	stor's Name)
(Addre	\$\$)
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(City/Si	ate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Dusin)	[Sakira Nassa)
(Busine	ss Entity Name)
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Certified Copies	Certificates of Status
Special Instructions to Filir	g Officer:
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COVER LETTER

TO:	Registration Sect Division of Corpo								
cub ir	VerdeSol, LL	l c							
SUBJE	CI:	Name of	Limited Liability Company						
			npany for Authorization to Transact Business in Florida," Certificate of renced foreign limited liability company to transact business in Florida.						
Please r	eturn all correspond	lence concerning this matter to th	e following:						
	Sonya C	ordina							
		}	Name of Person						
	VerdeSo	LLC							
		I	Firm/Company						
	1657 Wa	re Bottom Lane							
Address Mount Pleasant, South Carolina 29464 City/State and Zip Code									
							sonya@ve	rdesolglobal.com	
								E-mail address: (to be use	ed for future annual report notification)
For furt	her information con	cerning this matter, please call:							
	Sonya Cordina		843 810-0731 at ()						
		ume of Contact Person	Area Code Daytime Telephone Number						
	Mailing Address:		Street Address:						
Registration Section			Registration Section						
	Division of Cor	P	Division of Corporations						
P.O. Box 6327			The Centre of Tallahassee						
	Tallahassee, Fl		Tallahassee, FL 32303						
		for the following amount:							
	□ \$125.00 Filing	payable to: FLORIDA DEPAR Fee ■ \$130.00 Filing Fee & Certificate of Si	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate						

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:

VerdeSol, LLC				
(Name of Foreign I	mited Liability Company; must include "Limite	ed Liabilit	y Company," "L.I.,C.," or "LI	.C.")
N/A				
(If name unavailable, enter alternate m	ane adopted for the purpose of transacting business in F	lorida. The	alternate name must include "Lim	ited Liability Company," "L.L.C," or "LLC.")
South Carolina		3.	84-3350741	
(Jurisdiction under the law of wh	nich foreign limited liability company is organized)		(FE	I number, if applicable)
N/A 4.				
· · · · · · · · · · · · · · · · · · ·	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration	n.) liability)	
1657 Ware Bottom Lar 5.		6.	1657 Ware Bottom Lar	
(Street Address of Principal Office)		•	(Mailing Address)	
Mount Pleasant			Mount Pleasant	
South Carolina 29464			South Carolina 29464	·
7. Name and street address	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> :	acceptable)	20 46
Name:	Bill Havre, Registered Agents, Inc.			AFR 28
Office Address:	7901 4th St N, STE 4000			PH 7: 04
	St. Petersburg		33702	£ 04
	(City)		, Florida(Zip co	ode)

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 indeximanage [up to six (6) total]				
Title or Capacity:		Name and Address:	Title or Capacity	1	Name and Address:
■Manager	Name:	Sonya Cordina	□Manager	Name:	
■Member	Addre	1657 Ware Bottom Lane	□Member	Address: _	
Authorized	Moun	Pleasant, SC 29464	□Authorized		
Person			Person		
□Other		□Other	Other		□Other
■Manager	Name	Keith Freeman	□Manager	Name:	
■Member	Addre	1657 Ware Bottom Lane	□Member	Address: _	
Authorized	Moun	Pleasant, SC 29464	□Authorized		
Person			Person		, 2
□Other		Other	□Other		☐Others
					2 E II
□Manager	Name:		□Manager	Name:	
□Member	Addre	\$\$:	□Member	Address: _	<u>:</u>
□Authorized			□Authorized		
Person			Person		
□Other		□Other	□Other		□Other
9. Attached is a cert jurisdiction under the of the translator must 10. This document is	may be ificate of e law of st be sul	ted in accordance with section 605.4 the Department of State constitutes	r Florida Department of Stated by the light in a foreign language 0203 (1) (b), Florida Statute	e Annual Rep e official have e, a translatio s, I am aware	port form. ing custody of records in the n of the certificate under oath that any false information

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

VerdeSol, LLC, a limited liability company duly organized under the laws of the State of South Cardlina on September 27th, 2019, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 10th day of March. 2020.

Mark Hammond, Secretary of State