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9

## Foreign Limited Liability Company Neon Flux LLC

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## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "NEON FLUX 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 EIGHTEENTH DAY OF MAY, A.D. 2020.

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

20/31 20 77 9:5

at soon delawate gov/au

Authentication: 202946844

Date: 05-18-20

## Fax Audit # H20000146849 3

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECT COMPANY TO TRANSACT BU	TION 603 0902, FLORIDA STATUTES, THE SINESS IN THE STATE OF FLORIDA:	FOLLOWING IS SUBMITTED TO REGISTER A FO	REIGN LINITTED LLABILITY
. Neon Flux LLC		and the state of t	16.12
(Name of Fore	ign Limited Liability Company; unist inch	ude "Limited Liability Company," "L. L.C.," or "L	LC. )
(If name unavailable, enter alt	emate name adopted for the purpose of the	ausacting business in Florida. The alternate name	must include "Limited
Liability Coupany," "L.L.C," Delaware	01 "LLC. )	844923555	
	of which foreign limited liability	(FEI number, if applicable)	
4. Upon Qualification			
	(Date first transacted business in (See sections 605,0904 & 605,0905)	Florida, if prior to registration.) F.S. to determine penalty liability)	
5. <u>263 NE 61st Stre</u>	et, Miami, Florida 33137	.,	
	(Street Address of Princi	mal Ottoral	
263 NE 61st Stre	et, Miami, Florida 33137	pai Ottke)	
6.			
	(Mailing Addre	ess)	
7. Name and street address	is of Florida registered agent; (P.O. B	ox NOT acceptable)	
Name:	Business Filings Incorporate	<del>ed</del>	
Office Address:	1200 South Pine Island Roa	<u>d</u>	10202
	Plantation	. Florida 33324 (Zip code)	
	(City)	(Zip code)	N)
designated in this applicate to complywith the provisi	gistered agent and to accept service of the special service of the service of the special service of the special service of the special service of the servi	of process for the above stated limited liabili- it as registered agent and agree to act in this wer and complete performance of my duties,	ty company at the place capacity. I further agree
	Markl		ंत
		agent's signature) Mark Williams, A.V.P., B	usiness Filings Incorporate
	acity and address of the person(s) who		
Member: Yaron Ol	cun, 263 NE 61st Street, Mian	ni, Florida 33137	
			<del></del>
<ol> <li>Attached is a certificate jurisdiction under the law of the translator must be s</li> </ol>	of which it is organized. (If the certification)	ld, duly authenticated by the official having c icate is in a foreign language, a translation of a authorized person	ustody of records in the the certificate under oath
This document is execute submitted in a document t	d in accordance with section 605.0203 of the Department of State constitutes a	(1) (b), Florida Statutes, I am aware that any a third degree felony as provided for in s.817.	false information 155, F.S.
	Yaron Okun, Member		
	Typed or printe	ed name of signee	