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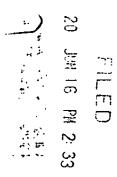
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COVER LETTER

то:	Registration Section Division of Corporations	
SUBJI	ECT: Florida,	Agase, LLC Name of Limited Liability Company
		Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida.
Please	return all correspondence concerning thi	is matter to the following:
	Brace	1 Tooley Name of Person
	<u>Flor</u>	Firm/Company
	P.	O.Box 773 Address
	Canyon	City/State and Zip Code Chui cemedia tx, com ress: (to be used for future annual report notification)
	E-mail addr	ress: (to be used for future annual report notification)
For fu	ther information concerning this matter,	please call:
	Brad Tooley Name of Contact Per	at (806) 6.78-65-83 8 Street Address: Provided the street Address of the street Addres
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
		amount: (IDA DEPARTMENT OF STATE) Filing Fee & \$160.00 Filing Fee, Certificate ertificate of Status Certified Copy of Status & Certified Copy

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

COMPANY TO TRANSACT BU	CTION 605.0902, FLORIDA STATUM SINESS IN THE STATE OF FLORIDA COMMITTED LIBITITY COMPANY, Must include the company of the company of the company, Must include the company of the comp	DA:			GN LIMITED L	IABILIT)
	name adopted for the purpose of transacting LC then foreign limited liability company is on		alterante name rouss include			C.")
Commoncings ander (see Taw Of M.				(FEI number, if applicable	•)	
	(Date first transacted business in Flor (See sections 605,0904 & 605,0905,	F.S. to determine penalty	iability)			
street Address of Principal Office)	27	6	(Mailing Address)	Box 773	3	
Amarillo,	Tx 79119		Canjon			
Name and street address	s of Florida registered agent:	(P.O. Box <u>NOT</u> 8	cceptable)		20	
Name:	Bobby Si	urles		•		
Office Address:	133 CYPRES	er passa	<u> 45.</u>		말 2	
	SAWTA ROSA	GEAR	, Florida 3	2459 Clp rode)	္ ယ	
egistered agent's accepts wing been named as reg	ance: distered agent and to accept se don, I hereby accept the appoi	ervice of process f	or the above stated	limited liability co	mipany at the	place

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.

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:
Manager	Name: Brad Tooley	(DK)anager	Name: Kristie Tooley
□Member	Address: P. O. Buy 773	□Member	Address: / Water cove Ct. Canyon, Tr. 79015
□Authorized	Canyon, Tx, 79015	□Authorized	Canyon, Tx 79015
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	#監督
Person		Person	
Other	Other	□Other	Other

<u>Important Notice</u>: 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.

ignature of an authorized person

Brad Tooley

Eyped or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Florida Agape, LLC (file number 803371710), a Domestic Limited Liability Company (LLC), was filed in this office on July 18, 2019.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 10, 2020.



Ruth R. Hughs Secretary of State





FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2020

BRAD TOOLEY FLORIDA AGAPE, LLC PO BOX 773 CANYON, TX 79015 US

SUBJECT: FLORIDA AGAPE, LLC Ref. Number: W20000053818

We have received your document for FLORIDA AGAPE, LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Laura D Chang Regulatory Specialist II

Letter Number: 720A00010893

6/16 Pecerved WC Cert.

RECEIVED
JUN 1 6 2020



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 7, 2020

BRAD TOOLEY FLORIDA AGAPE, LLC PO BOX 773 CANYON, TX 79015 US

SUBJECT: FLORIDA AGAPE, LLC Ref. Number: W20000045496

We have received your document for FLORIDA AGAPE, LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 320A00009425

Laura D Chang Regulatory Specialist II