Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200002369583)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

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

Email Address:_

Foreign Limited Liability Company UBUCARES, PLLC

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EEE 50 504



July 23, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEGALZOOM.COM

,

SUBJECT: UBUCARES, PLLC

REF: W20000078091

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tracy L Lemieux Regulatory Specialist II FAX Aud. #: H20000236958 Letter Number: 320A00013859

COVER LETTER

	UBUCARES, PLLC					
JBJ:	ECT: Name of	Limited Liability	Company			
.	nclosed "Application by Foreign Limited Liability Com	nany for Authoriza	ation to Transact Business in Florida." Certific	cate		
xiste.	nce, and check are submitted to register the above refer	renced foreign limi	ted liability company to transact business in F	lon		
ease	return all correspondence concerning this matter to the	e following:				
	Cheyenne Moseley					
		Name of Person				
	Legalzoom.com, Inc.					
	Firm/Company					
	101 N Brand Blvd 11th Fl					
	Address					
	Glendale, CA 91203					
	City/State and Zip Code					
	CTucker@UBUcares.com					
	E-mail address: (to be us	ed for future annua	report notification)			
For fu	urther information concerning this matter, please call:					
	Cheyenne Moseley	800 at (773-0888			
	Name of Contact Person	Area Code	Daytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle			
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPAR \$125.00 Filing Fee \$\Bigsim \text{\$130.00 Filing Fee}\$	_	Tallahassee, FL 32301 ATE O Filing Fee & S160.00 Filing Fee, Ce	ertifi		

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 HABILTI

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: UBUCARES, PLLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.) **UBUCARES LLC** (If name unavailable, enter alternate name adopted for the purpose of transacting business or Florids. The alternate name must include "Limited Liability Company," "L.L.C." or "LL.C.") 85-0801892 Washington (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0903, F.S. to determine penalty liability) (Street Address of Principal Office) 53 East Redondo Ave 53 East Redondo Avc Salt Lake City, UT 84115 Salt Lake City, UT 84115 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) UNITED STATES CORPORATION AGENTS, INC. Name: 5575 S. Semoran Blvd., Suite 36 Office Address: Orlando 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 agr 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.

CHEYENNE MOSELEY, ASSISTANT SECRETARY. UNITED STATES CORPORATION AGENTS, INC. (Registered agent's signature)

Michelle Morholt 53 East Redondo Avenue ake City, UT 84115 Other Christian Stuart	☐ Manager☐ Member☐ AuthorizedPerson☐ Other	Name:Address:Other
Other	Authorized Person	
Other	Person	
Other		Other
Christian Stuart	Other	Other
Christian Stuart		
	Manager	Name;
53 East Redondo Avenue	☐ Member	Address:
	☐ Authorized	
	Person	
Other	Other	Other
::	Manager	Name:
ess:	Member	Address:
	☐ Authorized	
	Person	
Other	Other	Other
I	Cake City, UT 84115 Other ess: attachment to report more than six (6) be added to the index when filing your to of existence, no more than 90 days of	Lake City, UT 84115 Person Other Manager ess: Authorized Person Person

Typed or printed name of signee



Secretary of State

1, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

UBUCARES, PLLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 04/14/2020.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

1 FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 07/21/2020 UBI Number: 604 603 935

STATE OF A STATE OF A

Given under my hand and the Scal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

Sun Ulgna-

Date Issued: 07/21/2020