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(R	Requestor's Name)	
(A	address)	
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(C	Occument Number)
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8/11/20

COVER LETTER

YU Events LLC ECT:			
	Name of Limited Liability Company		
	lity Company for Authorization to Transact Busin ove referenced foreign limited liability company to		
return all correspondence concerning this mat	ter to the following:		
Shea Bailey			
	Name of Person		
Yellow Umbrella Events			
	Firm/Company		
911 Farm to Market 1626 Suite 10	01B	2020 V	
Austin, TX 78748	Address	UL 29 HASSE	
	City/State and Zip Code		
shea@yellowumbrellaevents.com		2: - 1::2	
E-mail address: (t	to be used for future annual report notification)	क्रि ज	
ther information concerning this matter, please	e call:		
Shea Bailey	512 955-1320 at ()		
Name of Contact Person	Area Code Daytime Telepho	one Number	
Mailing Address: Registration Section	Street Address:		
Division of Corporations	Registration Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810)	
	Tallahassee, FL 32303		
Enclosed is a check for the following amour			
Please make check payable to: FLORIDA I \$125.00 Filing Fee \$130.00 Filing Certification	g Fee & 🔲 \$155.00 Filing Fee & 🗏 \$160.	00 Filing Fee. (f Status & Cert	

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: YU Events LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LL.C.") Texas (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 & 605.0905, F.S. to determine penalty liability) 326 Marquitos Dr 911 Farm to Market 1626 Suite 101B (Mailing Address) (Street Address of Principal Office) Kvic, TX Austin, TX 78640 78748 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Tom Chelednik Name: 5866 NW Jannebo Court Office Address: Port St. Lucie , Florida (City) 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.

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]:

itle or Capacity:	Name and Address:	Title or Capacity:		
lManager	Name: Cheryl Bailey	■Manager	Name: R. Shea Bailey	
]Member	Address:	□Member	Address: 326 Marquitos Dr Kyle, TX 78640	
Authorized	Kyle, TX 78640	☐ Authorized		
Person		Person	202	
Other	Other	□Other		
]Manager	Name:	□Manager	Name: 29	
]Member	Address:	□Member	Address: For N	
]Authorized		□Authorized	<u> जिल्ल</u> ज	
Person		Person		
Other	Other	Other	Other	
]Manager	Name:	□Manager	Name:	
∃Member	Address:	□Member	Address:	
]Authorized		□Authorized		
Person		Person		
□Other	Other	Other	Other	

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.

K. She	a Bailey	
R. Shea Bailey	Signature of art authorized person	
	Typed 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 YU Events LLC (file number 802706396), a Domestic Limited Liability Company (LLC), was filed in this office on April 20, 2017.

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 July 17, 2020.

THE OF YEAR

Ruth R. Hughs Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 983845310003

Phone: (512) 463-5555 Prepared by: SOS-WEB