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Account#: I20000000088

Date:	09/24/2020	
Name:_	Merritt Walker	
Referen	nce #: <b>1268948</b>	
	lame: GT5	DIGITAL, LLC
V A	Articles of Incorporation/Authorization	n to Transact Business
	Amendment	
	Change of Agent	
F	Reinstatement	·
	Conversion	
<u> </u>	Merger	
	Dissolution/Withdrawal	
F	Fictitious Name	
	Other	
Authoriz	zed Amount:\$125	
Signatu	ге: , дди.)	

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£. 4852 7682 0700

TO: Registration Section

## COVER LETTER

Division	of Corporations				
SUBJECT:	GT5	DIGITAL, LL	С		
Name of Limited Liability Company					_
	pplication by Foreign Limited Liability Ceck are submitted to register the above r				
Please return all c	orrespondence concerning this matter to	the following:			
	ERICA AU				
	Name of Person				
	KASTNER GRAVELLE LLP				
	Firm/Company				
	1000 N LAMAR BLVD, STE 300				
	Address				
	AUSTIN, TX 78703				
	City/State and Zip Code				_
	rkamrath@gt5digital.com				
	E-mail address: (to be	used for future annu	al report notifi	ication)	_
For further inform	nation concerning this matter, please call	:			
	Ray Kamrath	<sub>at 1</sub> 203	1	923-3893	
	Name of Contact Person	Area Cod	e Daytii	me Telephone Number	_
Division	SG ADDRESS: of Corporations tion Section c 6327				
Tallahas	see, FL 32314			ative Center Circle e. FL 32301	
	I is a check for the following amount: take check payable to: FLORIDA DEP.	ARTMENT OF STA	ATE		
_	5.00 Filing Fee S130.00 Filing F	Fee & S155.0	0 Filing Fee & fied Copy	\$ 160.00 Filing of Status & Ce	Fee, Certificate

and accept the obligations of my position as registered agent.

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

	GT5 DIGIT	AL, L	.LC
(Name of Foreign	Limited Liability Company, must include "Limite	d Liabilit	y Company," "L.L.C.," or "L.L.C.")
ame unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	rida The a	ternate name must include "Limited Liability Company," "L.I. C," or "L
DE	LAWARE	,	
Thirtsdiction under the law of v	thich foreign limited liability company is organized)	٦.	(FEi number, if applicable)
	SEPTEMBER 21	20.	20
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	-	
700 T 4 D 4			
799 TARA	NOTT DRIVE	6.	799 TARAWITT DRIVE
			•
LONGBOAT	KEY, FL 34228		LONGBOAT KEY, FL 34228
Nows and atmost address	on of Florida marintand marks (D.C. Dov	NOT.	· .
Name and street agure	ss of Florida registered agent: (P.O. Box	<u>NO1 :</u>	(cceptable)
	00051101/01/05		10
Name:	COGENCY GLOBA		NC.
08	115 North Calhoun St.	Sui	to 1
Office Address:		<u> </u>	<del>(C 4</del>
	<del></del> 11 1		, Florida <u>32301</u> (Zup code)
	l allahassee		. 1 10 1 da

Mensett Walker, ASSt. Secretary
(Registered agent's signature)

8. For initial index manage [up to six (6)	ing purposes, list names, title or capacity and a 6) total]:	addresses of the primary m	embers/managers or persons authorized to
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
⊠Manager	Name: RAY KAMRATH	Manager     ✓	Name: ERNESTO DE LA FE
⊠Member	Address: 799 TARAWITT DRIVE	<b>⋉</b> Member	Address: 799 TARAWITT DRIVE
Authorized	LONGBOAT KEY, FL 34228	Authorized	LONGBOAT KEY, FL 34228
Person		Person	
Other	Other	Other	Other
□Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other
indexed individuals  9. Attached is a cert jurisdiction under th of the translator mus  10. This document i	ise an attachment to report more than six (6). I may be added to the index when filing your Fl ificate of existence, no more than 90 days old, the law of which it is organized. (If the certificate the submitted) is executed in accordance with section 605.020 ment to the Department of State constitutes a the Docusioned by:    Ray	dorida Department of State duly authenticated by the te is in a foreign language.  3 (1) (b), Florida Statutes, aird degree felony as provided.	Annual Report form.  official having custody of records in the a translation of the certificate under oath.  I am aware that any false information.
		TH, MANAGER	

Typed or printed name of signee

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GT5 DIGITAL, 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 TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GT5 DIGITAL,

LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2020.

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



Authentication: 203720861

Date: 09-23-20

3706878 8300 SR# 20207445655