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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017

Phone : (855) 498-5500

Fax Number

: (800) 432-3622

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

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## Foreign Limited Liability Company MIGHTY SWELL COCKTAIL COMPANY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$793.75

NOV 12 2020

M. SOLOWON

# 2020 NOV 10 4K M: 15

### COVER LETTER

SUBJECT:	Aighty Swell Cocktail Company, LLC		
OBJECT: _	Name	of Limited Liability Company	
The enclosed " Existence, and	Application by Foreign Limited Liability C check are submitted to register the above r	Company for Authorization to Transact Business in Florida," Coeferenced foreign limited liability company to transact business	Certificate of ss in Florida
lease return a	ll correspondence concerning this matter to	the following:	
	Christian Mella	:	
	<del></del>	Name of Person	
	Mighty Swell Cocktail Company, LLC		
		Firm/Company	
	706 Guadalupe Street		•
,		Address	
	Austin, TX 78701		Silver Magn
	C	ity/State and Zip Code	
	christian@mightyswell.com		CELLANDE PE
	E-mail address: (to be	used for future annual report notification)	7 - 100 13 - 101
For further inf	formation concerning this matter, please cal	n:	고 일본
Chri	stian Mella	252-6165	
	Name of Contact Person	Area Code Daytime Telephone Number	
Regi Divi P.O.	ing Address; istration Section ision of Corporations Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
P.O. Tall	Box 6327	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 **ARTMENT OF STATE	

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

	Company, LLC  Limited Liability Company; must include "Limited Li	ability Company. "LLC., or "LLC.")	<del></del>
india of tolera	control control, and allow control control		
unavailable, enter alternate o	erns adopted for the purpose of transacting business in Florid	a. The alternate name must include "Limited Liability Company," "L.L.	ัด. ว. ชายนา เกาะสายนา
:25		47-4871362	
	tich forciga tinehod liability company is organized)	3. (FEI number, if applicable)	
	•		
29/19			
	(Dute first transacted business in Florida, if prior to regi (See sections 605,0904 & 605,0905, F.S. to determine)	stration.) penaity flability)	
16 Guadalupe Street,	Austin TX 78701	706 Guadalupe Street, Austin TX 78701	
(ddress of Principal Office)		6. (Madaug Address)	<del></del>
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	<u> </u>		——∯yy <b>~</b>
rome and street addres	es of Florida revistered agent: (P.O. Box )	(OT acceptable)	74 E
ame and street address	ss of Florida registered agent: (P.O. Box )	IOT acceptable)	STATE AND AND
ame and street addre	ss of Florida registered agent: (P.O. Box 1)  Capitol Corporate Services Inc.	<u>IOT_acceptable)</u>	TO AN IB:
ame and street address Name:	·	IOT acceptable)	SALE BOATS
Name:	·	NOT_acceptable)	SALE BURNERS
	Capitol Corporate Services Inc.		SALE HOUSE
Name:	Capitol Corporate Services Inc.	32301 Florida	SALE BURNERS
Name:	Capitol Corporate Services Inc.  515 East Park Ave. 2nd Floor		IN AUBITO
Name: Office Address:	Capitol Corporate Services Inc.  515 East Park Ave. 2nd Floor  Tallahassee  (Cky)	32301 , Florida	An IB: 16
Name: Office Address: stered agent's accep	Capitol Corporate Services Inc.  515 East Park Ave. 2nd Floor  Tallahassee  (Chy)	32301, Florida  Cip code)  poeess for the above stated limited liability compan	TOT SHATE TO
Name: Office Address: stered agent's accep	Capitol Corporate Services Inc.  515 East Park Ave. 2nd Floor  Tallahassee  (Chy)  stance:  registered agent and to accept service of pro-	32301 , Florida  Cip eads)  ocess for the above stated limited liability company registered agent and agree to act in this capacity.	y at the place
Name: Office Address: stered agent's accepting been named as remained in this application with the provise	Capitol Corporate Services Inc.  515 East Park Ave. 2nd Floor  Tallahassee  (Chy)  stance:  registered agent and to accept service of pro-	32301, Florida  Cip code)  poeess for the above stated limited liability compan	y at the place I farther agree familiar with

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Fitte or Capacity:	Name and Address:	Title or Capacity;	Name and Address:
□Manager	Name:	☐Manager	Name: Jody Wiegrove
□Member	Address: 1301 South MOPAC	□ Member	Address: 161 Roadrunner Lane
□Authorized	Suite 350	☐Authorized	Burnet, TX 78611
Person	Austin, TX 78746	Person	
Board Mer	nber Other	BOther Board Men	Other
□Manager	Name:	□Manager	Name: Brad Seidel
□Member	Address: 2001 Stoneridge Terrace	□Member	Address: 6 Hedge Lane
□ Authorized	Austin, TX 78746	□Authorized	Austin, TX 78746
Person		Person	
Board Mer	mber Other	Board Men ⊞Other	nber Other
□Manager	John Beal		Name: Blake Billman
☐ Member	Address: 2508 Cascade Drive	□Member	Address:
□ Authorized	Austin, TX 78757	□Authorized	Austin, TX 78746
Person		Person	
President	& GM	©FO ■Other	□Other

Important Notice: 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 enstody 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.

Signature of an authorized person

John B. Real

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



Ruth R. Hughs Secretary of State

### 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 Mighty Swell Cockrail Company, LLC (file number 802242529), a Domestic Limited Liability Company (LLC), was filed in this office on June 25, 2015.

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 November 10, 2020.



Ruth R. Hughs Secretary of State