

| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| то: | Registration Section Division of Corporations | ** |
| cup in | Esatel, LLC | |
| SUBJE | Name of Limited Liability Company | |
| The enc Existence | sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," C , and check are submitted to register the above referenced foreign limited liability company to transact busines | ertificate of ss in Florida. |
| Please r | urn all correspondence concerning this matter to the following: | |
| | Michelle Bullock | |
| | Name of Person | |
| | Esatel | |
| | Firm/Company | |
| | 2716 Spinnerbait Court | |
| | Address | |
| | St Augustine FL 32092 | |
| | City/State and Zip Code | |
| | staugustineshell@gmail.com | |
| | E-mail address: (to be used for future annual report notification) | |
| For furt | er information concerning this matter, please call: | |
| | Michelle Bullock 386 222-8007 at () | |
| | Name of Contact Person Area Code Daytime Telephone Number | |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 STREET ADDRESS: Division of Corporations Registration Section Clifton Building | |
| | Fallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 | |
| Enclose | is a check for the following amount: | |
| | \$125.00 Filing Fee \$\bigs\tau \\$130.00 Filing Fee & \Bigs\tau \\$155.00 Filing Fee & \Bigs\tau \\$160.00 Filing Fe \tau \tau \tau \tau \tau \tau \tau \tau | |

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:

| Esatel, LLC | | | |
|--|--|--|---|
| (Name of Foreign | Limited Liability Company; must include "Lim | ited Liability Com | ipany," "L.L.C.," or "LI.C.") |
| If name unavailable, enter alternate n | ame adopted for the purpose of transacting business in | Florida, The alternate | name must include "Limited Liability Company," "L.L.C," or "LLC." |
| State of Colorado | | | 4138048 |
| • | nich foreign limited liability company is organized) | 3 | (FEI number, if applicable) |
| 1/1/2020 | | | |
| 1. | (Date first transacted business in Florida, if prior (See sections 605,0904 & 605 0905, F.S. to dete | to registration.) rmine penalty liability | y) |
| 171 S. Carr Street, Lak | ewood CO 80226 | 271e 6. | 6 Spinnerhait Ct, St Augustine FL 32092 (Mailing Address) |
| (Street Address of F | rincipal Office) | | (Mailing Address) |
| | | | |
| | | | |
| | | | |
| 7 Name and attends address | s of Florida registered agent: (P.O. B | ov NOT accor | ntable) |
| 7. Name and street address | s of Florida registered agent. (F.O. D | ux <u>NOT</u> accep | nable) |
| Name | Michelle Bullock | | |
| Name: | | | _ |
| Office Address: | 2716 Spinnerbait Ct | | <u></u> |
| | St Augustine | | 32092 . Florida |
| | (City) | | (Zip code) |

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.

(Registered agent's signature)

| <u>Fitle or Capacity:</u> | Name and Address: |
|---------------------------|-----------------------|
| CEO/ Manager | Michelle Bullock |
| | 2716 Spinnerbait Ct |
| | St Augustine FL 32092 |
| VP/ Manager | Chester Bullock, Jr. |
| | 2716 Spinnerbait Ct |
| | St Augustine FL 32092 |
| | |
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| | |
| | |

(Use attachments if necessary)

- 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.

Signature of an authorized person

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I. Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

ESATEL

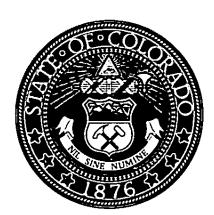
is a

Limited Liability Company

formed or registered on 03/26/2019 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20191267564.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/30/2020 that have been posted, and by documents delivered to this office electronically through 12/02/2020 @ 08:32:25.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 12/02/2020 @ 08:32:25 in accordance with applicable law. This certificate is assigned Confirmation Number 12760918 .



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.uv/btz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."