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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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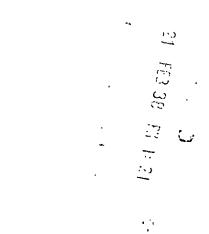
Office Use Only

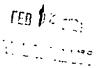
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COVER LETTER

O: Registration Section Division of Corporations	4.
EVETTE JOLIE BTS, LLC U BJECT:	
OBJECT.	Name of Limited Liability Company
	Liability Company for Authorization to Transact Business in Florida," Certificate the above referenced foreign limited liability company to transact business in Flori
ease return all correspondence concerning th	is matter to the following:
JOHN PEARCE	
	Name of Person
PEARCE & COMPANY, po	
	Firm/Company
8310 N CAPITAL OF TEXA	AS HWY, STE 150
	Address
AUSTIN, TX 78731	
	City/State and Zip Code
jpearce@pearceattycpa.com	
E-mail addr	ress: (to be used for future annual report notification)
or further information concerning this matter,	please call:
JOHN PEARCE	512 441-1411 at ()
Name of Contact Per	
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
_	



January 22, 2021

JOHN PEARCE 8310 N CAPITAL OF TEXAS HWY STE 150 AUSTIN, TX 78731

SUBJECT: EVETTE JOLIE BTS, LLC

Ref. Number: W21000006291

We have received your document for EVETTE JOLIE BTS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

Letter Number: 021A00001520

#21197 120K1

RECEIVED

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 TOTRANS ICT BUSINESS IN THE STATE OF FLORIDA:

ime unavailable, enter alternate na	ame adopted for the purpose of transacting husiness in Florida	a. The alternate name must include "Limited Liab	olity Company," "L.L.C.	" or "L.L.C."
EXAS		85-4308225 3.		
(Jurisdiction under the law of wh	nch foreign limited liability company is organized)	(FEI number	, if applicable)	
	(Date first transacted business in Florida, if prior to reg (See sections 605 0904 & 605 0905, F.S. to determine	stration) penalty liability)		
6721 VALBURN DRI		AUSTIN, TX 78731		
et Address of Principal Office)		6. (Mailing Address)		
			18 K	2
			- ,	
			<u>ين</u> ن د	<u> </u>
vaine and <u>street address</u>	ş of Florida registered agent: (P.O. Box <u>N</u>	OI acceptable)		·
Nicoro	CT CORPORATION SYSTEM			
Name:				·)
Office Address:	1200 SOUTH PINE ISLAND ROAD	 		
	PLANTATION	. Florida(Zip code)		
		. Florida		
	(Crty)	(zap tode)		

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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: ROBERT SURECK	Manager	Name:
□Member	Address: 6721 VALBURN DR	□Member	Address:
□Authorized	AUSTIN, TX 78731	□Authorized	AUSTIN, TX 78731
Person		Person	
□Other	Other	[]Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	Other	□()ther
□Малаger	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
☐Authorized		□Authorized	
Person		Person	
□Other	Other	□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.

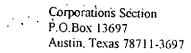
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must 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

United Sureck

Typed or printed name of a green





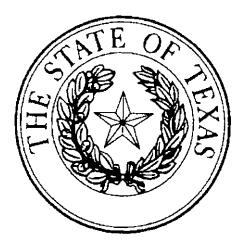
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for EVETTE JOLIE BTS, LLC (file number 803853634), a Domestic Limited Liability Company (LLC), was filed in this office on December 08, 2020.

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 January 14, 2021.



Ruth R. Hughs Secretary of State

TID: 10264 Dial: 7-1-1 for Relay Services

Document: 1020169020002

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