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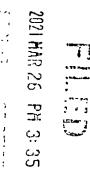
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| Ю: | Registration Section Division of Corporations | • | •, | • | • | • | ₹ • | | j Ç | |
| - . | Ivy Marie LLC | | | | | | - | | | |
| UBJI | ECT: | Name o | of Limited | d Liability C | ompany | | ·· - | | | |
| he en Exister | closed "Application by Foreign Limite ace, and check are submitted to register | 145 SW 13th Street, #0420 Address Miami, FL 33130 Address | | | ertificate s in Flor | | | | | |
| lease | return all correspondence concerning t | his matter to t | he follov | ving: | | | | | | |
| | Kelsey Hopkins | | | | | | | | | |
| | | | Name of | f Person | | | | | | |
| | Ivy Marie LLC | | | | | | | | 202 | |
| | Firm/Company | | | | | | | | | |
| | 145 SW 13th Street, #0420 | 1 | | | | | | • | 2 | FIZFTERN Line Suit |
| | Address | | | | | | | <u>:</u> | | * . * * ; 1 * ; |
| | Miami, FL 33130 | | | | | | | | | A TOWN |
| | | City | /State an | d Zip Code | | | | | — <u>သ</u> | |
| | kelsey@shopivymarie.com | | | | | | | | | |
| | E-mail ad | dress: (to be u | sed for fi | uture annual | report noti | fication) | | _ | | |
| or fu | ther information concerning this matte | er, please call: | | | | | | | | |
| | Kelsey Hopkins | | _ | 256 | 5272081 | | | | | |
| | Name of Contact P | erson | at (_ | Area Code | Dayt | ime Tele | phone | Numb | er | |
| | Mailing Address: | | | t Address: | | | | | | |
| | Registration Section Division of Corporations | | | Registration Section | | | | | | |
| | | | | Division of Corporations | | | | | | |
| | P.O. Box 6327 | | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | | | | | | |
| | Tallahassee, FL 32314 | | | o N. Monro ahassee, F | | Suite 8 | 310 | | | |
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| | Enclosed is a check for the following | | F3/F18 # T1 &: | er or er ta | re | | | | | |
| | Please make check payable to: FLO | RIDA DEPAI 00 Filing Fee & | | \$155.00 Fili | | ₽ \$1. | ፋስ ስስ | Elling I | See Co | rtificate |
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | name adopted for the purpose of transacting business in Fl | lorida The | alternate name must include "Limited Liab | ility Company, | "L.IC," | or "Ll | | |
|--|--|------------------|---|----------------|----------------------|-------------------|--|--|
| New York | | | 85-2030498 | | | | | |
| (Jurisdiction under the law of which foreign limited liability company is organized) | | 3. | (FEI number, if applicable) | | | | | |
| N/A | | | | | 2021 HA | e | | |
| (Date first transacted business in Florida, if prior to registratic (See sections 605 0904 & 605 0905, F.S. to determine penalty | | n.) hability) | ٠:, | 2 | # #125 7 424 1 | | | |
| 35 Wrights Mill Road | | 6 | 145 SW 13th Street, #0420 | | 6 P | 2 2*** 3 ** | | |
| eet Address of Principal Office) | | 0 | (Mailing Address) | [.,0] | — —— ယ | 5== ~_= | | |
| Armonk, NY 10504 | | | Miami, FL 33130 | | <u>မှ</u> သ | | | |
| | ss of Florida registered agent: (P.O. Box | NOT: | acceptable) | | | | | |
| Name and street address | | | • • | | | | | |
| Name and street addres | | | | | | | | |
| Name and street address Name: | Kelsey Hopkins | | | | | | | |
| | | | | | | | | |

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.

Kelsey Hopsin
(Registered agont's signature)

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]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: Name: Kelsey Hopkins Name: _____ □Manager 145 SW 13th Street, #0420 □Member ☐ Member Address: Miami, FL 33130 ☐ Authorized □ Authorized Person Person Owner □Other____ Other___ Other_ □Other □Manager □Manager Name: ______ □Member Address: □Member Address: □ Authorized □ Authorized Person Person Other___ Other □Other □Other Name: □Manager Name: Address: ____ □Member □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. Nonindexed 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. Telyus Hostin Signature of an authorized person

Typed or printed name of signee

Kelsey Hopkins

State of New York Department of State } ss:

I hereby certify, that IVY MARIE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/17/2020, and that the Limited Liability Company is existing so far as shown by the records of the Department.



2021 MAR 26 PH 3: 35

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 11th day of March two thousand and twenty-one.

Braden C Higher

Brendan C Hughes
Executive Deputy Secretary of State

Addendum

The purpose of this addendum is to clarify any misunderstanding on what the "Principal Office" on this form should be for Ivy Marie LLC's Foreign Entity application.

The below address is the permanent business address of Ivy Marie LLC:

35 Wrights Mill Road

Armonk, NY 10504

The following address is the location/mailing address of Ivy Marie LLC for FL Foreign Entity purposes:

145 SW 13th Street, #0420

Miami, FL 33130

Kelsey Hopkins, Owner

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