## 556el

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Dacument Number)						
Certificates of Status						
Special Instructions to Filing Officer						
w21-62952						

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 795942 8212190

AUTHORIZATION :

COST LIMIT : \$ 130.00

ORDER DATE: May 5, 2021

ORDER TIME : 8:45 AM

ORDER NO. : 795942-005

CUSTOMER NO: 8212190

#### FOREIGN FILINGS

NAME: HOTWIRE HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX\_\_\_\_\_PLAIN STAMPED COPY

XX\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER:

#### COVER LETTER

ro:	Registration Section Division of Corporations	
UBJ	Hotwire Holdings, LLC	
		Name of Limited Liability Company
he er Existe	nclosed "Application by Foreign Limited Liabince, and check are submitted to register the ab	ility Company for Authorization to Transact Business in Florida," Certificate bove referenced foreign limited liability company to transact business in Florications.
lease	return all correspondence concerning this ma	tter to the following:
	Antonio Contarini	
		Name of Person
	Hotwire Communications	
		Firm/Company
	2100 West Cypress Creek Roa	ad
		Address
	Fort Lauderdale, FL 33309	
	<del></del>	City/State and Zip Code
	antonio.contarini@hotwirecomm	unication.com
	E-mail address: (	to be used for future annual report notification)
or fu	rther information concerning this matter, pleas	se call:
	Antonio Contarini	305 776-4822
	Name of Contact Person	Area Code Daytime Telephone Number
	Mailing Address:	Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amoun Please make check payable to: FLORIDA	
	■ \$125.00 Filing Fee	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTEX THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

li name unavailable, enter alternate	name adopted for the purpose of transacting business in	Florida, The	alternate name must include "Limited Liabili	ty Company," "L.L.C," or	"LLC."}	
Delaware		3.	86-3259622			
(Jurisdiction under the law of v	which foreign limited liability company is organized)	5.	(FEI number, if	fapplicable)	<del></del>	
·	(Date first transacted business in Florida, if prior	to revisimilar				
2400 W 0	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to deter	nine penalty		_		
2100 West Cypress		6.	2100 West Cypress Creek R	Creek Road		
areet Address of Principal Office)			(Mailing Address)			
Fort Lauderdale, FL	33309		Fort Lauderdale, FL 33309			
Name and street addre	ss of Florida registered agent: (P.O. Bo	ov NOT a	ccentable)	20:	_	
Name and street addre	ss of Florida registered agent: (P.O. Bo Antonio Contarini	ox <u>NOT</u> a	cceptable)	2021 HAY -6		
		ox <u>NOT</u> a	cceptable)	2021 HAY -6 AM II		
N'ame:	Antonio Contarini	ox <u>NOT</u> a	 	2021 HAY -6 AM 11: 45	2717 O	
N'ame:	Antonio Contarini 2100 West Cypress Creek Road	ox <u>NOT</u> a	  33309	2021 HAY -6 AM 11: 45	71.00	

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	<u>y:</u>	Name and Address:
⊠Manager	Name: Kristin Johnson	□Manager	Name:	
□Member	Address: 2100 West Cypress Creek Road	□Member	Address:	
□Authorized	Fort Lauderdale, FL 33309	□Authorized		
Person		Person		<del> </del>
Other	Other	□Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member		
□Authorized		□Authorized		
Person		Person		
□Other	Other	Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
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

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HOTWIRE HOLDINGS, 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 FIFTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOTWIRE HOLDINGS, LLC" WAS FORMED ON THE FIFTH DAY OF MARCH, A.D. 2021.

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

Authentication: 203136223

Date: 05-05-21