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COVER LETTER

				COVEREDITER
TO:	Registration of	on Section Corporations		
SUBJE	ECT:	Safe	Haven	Defense Texas LLC Name of Limited Liability Company
				bility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida.
Please	return all cor	respondence co	ncerning this ma	atter to the following:
	_	C	Hherin	l Kirschling Name of Person
	_	Sa	efe Ha	Even Defense Texas, LLC Firm/Company
		120	S. F	Parkway Dr Address
	_		Verni	a Texas 78121 City/State and Zip Code
		<u>@</u>	E-mail address:	(to be used for future annual report notification)
For fu	rther informa	tion concerning	this matter, plea	ase call:
	Ceth	erine of	Contact Person	at (904) 826-7/15 Area Code Daytime Telephone Number
	Division P.O. Box	tion Section of Corporati		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Enclosed is a check for the following amount:
Please make check payable to: FLORIDA DEPARTMENT OF STATE

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

N COMPLIANCE WITH SECT COMPANY TO TRANSACT BU	TION 605.0902, FLORIDA STATUTES, THE FO SINESS INTHE STATE OF FLORIDA:	OLLOWING IS SUBMITTED TO REGISTER	A FOREKIN LIMITED LIABILIT.
iS	a fir Haven De fenzimited Liability Company; must include "Limited	se Texas LLC	
(Name of Foreign L	imited Liability Company, most include "Linuted	d Liability Company, V.L.L.C., or "LLC.")	
If a one unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	lords. The alternate name most include "Limited Link	thty Company," "L.I. C," or "LLC.")
7-E & Q.S. (Turediction under the law of wh	nich foreign limited hability company is organized)	3. 83-4353 (FE) murriser.	If applicable)
4	(Date first immuniced business on Florida, Il prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) ame penalty hability)	
5. /2 C S. (f-	Parkway Dr		way Dr
Lavernia	TX 78121	6. 120 S. Park (Mailing Address) La Vernia, T	X 78121
			
 Name and street addres 	s of Florida registered agent: (P.O. Box	x NOT acceptable)	*
Name:	Jills Atwood		
Office Address:	2730 USI South	h, Suite E	•
	St. Augustine, F	-C , Florida 3208	<u>&</u>
designated in this applica to comply with the provisi	tance: gistered agent and to accept service of tion, I hereby accept the appointment a ons of all statutes relative to the propet s of my position as registered agent.	is registered agent and agree to act in	this capacity. I further agre
	(Régistered agent 's	two of	

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: Louie W. Pellechio	□Manager	Name: Cotherine Kirschling
□Member	Address: 117 Woodlands Dr	□Member	Address: 108 Whitew: ngWa
□Authorized	La Vernia, TX 78121	Authorized	Floresville, TX 78114
Person		Person	
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	□Other
□Manager	Name:	□Мападет	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

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



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 Safe Haven Defense Texas, LLC (file number 803282976), a Domestic Limited Liability Company (LLC), was filed in this office on April 03, 2019.

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 May 04, 2021.



Ruth R. Hughs Secretary of State