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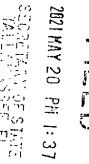
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:

Registration Section

Div	ision of Corporations	·		
SUBJECT:	Keller Concierge, LLC			
50DJ1.C.1.		me of Limited Liability Company		
		y Company for Authorization to Transact Business in Florid e referenced foreign limited liability company to transact be		
Please return	all correspondence concerning this matter	r to the following:		
	Gayln Ziegler			
		Name of Person	_	
	Keller Concierge, LLC		20.	
		Firm/Company	2021 KAY	****
	1221 S MoPac Expy, Suite 400		NY 21	**etro
		Address	_ C	1
	Austin, TX 78746		PR -:	C
City/State and Zip Code		37		
	brokerage@kelleroffers.com			
	E-mail address: (to	be used for future annual report notification)	_	
For further is	nformation concerning this matter, please of	rall:		
Ga	yln Ziegler	903 918-8085 au ()		
	Name of Contact Person	at () Area Code Daytime Telephone Number	_	
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Plea	closed is a check for the following amount: ase make check payable to: FLORIDA DE \$125.00 Filing Fee S130.00 Filing I Certificate	EPARTMENT OF STATE		

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Texas			y Contipany, Time C.	" or "LLC."
		3.		
(Jurisdiction under the law of wh	ich foreign limited hability company is organized)	3. (FE) number, it.	applicable)	_
5/11/2021			202 38	
	(Date first transacted business in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	istration.) penalty hability)		-
1221 S MoPac Expy, St	uite 400	6(Mailing Address)	W 20	Comme
eet Address of Principal Office)		(Mailing Address)	7.0 TO	
Austin, TX 78746		Austin, TX 78746	当の発	
			- 15T ω	
-				
Name and stead address.	of Florida registered agent: (P.O. Box <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</u>	10Th a consequent of		
Name and street address	of Fiorida registered agent. (F.O. Box <u>8</u>	io i acceptable)		
	Adam Hodkin			
Name:				
Office Address:	1200 N. Federal Highway, St. 200			
Office Address:				
Office Address:	Boca Raton		_	
Office Address:			_	
egistered agent's accept:	Boca Raton (City)	, Florida(Zap code)	_	

(Registered agent'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):

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:	
■Manager	Name: Gayln Ziegler	■Manager	Name: Mitchell S Johnson	
□Member	Address: 1221 S MoPac Expy	□Member	Address: 1221 S MoPac Expy	
□Authorized	Suite 400	□Authorized	Suite 400	
Person	Austin, TX 78746:	Person	Austin, TX 78746	
□Other	□Other	□Other	Other	
□Manager	Name:	□Manager	Name: 2821 X X X X X X X X X X X X X X X X X X X	
□Member	Address:	□Member	Address:	
□Authorized	-	□Authorized	WC P II	
Person		Person	7	
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)
- 40. 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.

<u>GAYIN ZIEGIEV</u> KAYIN ORBER MAY 11, 2021 19 45 CDS	-	
	Signature of an authorized person	
Gayln Ziegler		
	Typed or printed name of signee	

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 KELLER CONCIERGE, LLC (file number 803652080), a Domestic Limited Liability Company (LLC), was filed in this office on June 16, 2020.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate MITCHELL S JOHNSON as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

1221 S MOPAC EXPY, SUITE 400

AUSTIN, TX - 78746 USA

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 11, 2021.



Ruth R. Hughs Secretary of State

Dial: 7-1-1 for Relay Services Document: 1050218850005

Prepared by: SOS-WEB