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(Requestor's Name)					
(Address)					
(Ac	idress)				
(Ci	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
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COVER LETTER

TO:

SES 095, LLC CT:	
	me of Limited Liability Company
losed "Application by Foreign Limited Liability ee, and check are submitted to register the above	y Company for Authorization to Transact Business in Florida," C e referenced foreign limited liability company to transact busines
eturn all correspondence concerning this matter	to the following:
Lindsey Talbot	
	Name of Person
Ridgeway Management, LLC	
	Firm/Company
3214 N University Ave. #104	
·····	Address
Provo, Ut 84604	
	City/State and Zip Code
lindsey@ridgewayinv.com	
E-mail address: (to b	be used for future annual report notification)
ner information concerning this matter, please e	all:
Lindsey Talbot	801 341-1881
Name of Contact Person	at () 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
	191191999999 14 474114

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 TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SES 095, LLC							
(Name of Foreign	Limited Liability Company: must include "Limite	d Liabilit	y Compai	ny," "L.L.C.," or "LLC.")		
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. The	alternate i	name must include "Lumited	Liability Compa	ny," "L.	.L.C," or "LLC."
State of Utah 2.		,		11809			
2. (Jurisdiction under the law of which foreign limited hability company is organized)		3.		(FEI number, if applicable)			
4.							
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration ine penalty	ı.) liability)				
3769 Acline Road			3214 N	University Ave. #1	04		
Street Address of Principal Office)		٠.	(N	failing Address)			
Punta Gorda, FL 33950)		Provo.	UT 84604			
			_				
							
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT a	accepta!	ble)	<i>;</i>	21	
Name:	Stanley T. Padgett					7 I MOL	FLE
Office Address:	201 E Kennedy Blvd. Ste 600				/	A	(E)
	Tampa			33602 , Florida	ADA	ည် ထဲ	
	(City)	-		(Zip code)			

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.

(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: Tanner Weekes	□Manager	Name: Capital Resources, LLC
□Member	Address: 3214 N University Ave, #104	■Member	Address: 3214 N University Ave, #104
□Authorized	Provo, UT 84604	□Authorized	Provo. UT 84604
Person		Person	
□Other	Other	□Other	Other
□Manager	Name: Lindsey Talbot	□Manager	Name:
□Member	Address: 3214 N University Ave, #104	□Member	Address:
■Authorized	Provo. UT 84604	□Authorized	
Person		Person	
Other	Other	Other	Other
□Manager	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.

Lindsay Talbot



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utab Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

06/03/2021 12256001-016306032021-916590

CERTIFICATE OF EXISTENCE

Registration Number:

12256001-0163

Business Name: Registered Date: SES 095, LLC April 12, 2021

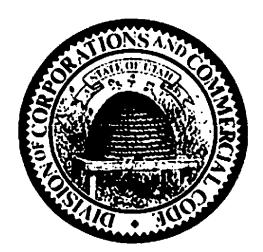
Entity Type:

LLC - Series Domestic

Status:

Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and,



that Articles of Dissolution have not been filed.

L. Veillette

Leigh Veillette Director Division of Corporations and Commercial Code