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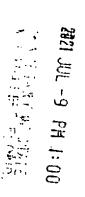
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JUL 15 2021 M. SCLOMON

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:	Patriot Core Supply, LLC				
SUBJECT:		f Limited Liability Company			
The enclosed "A _j Existence, and ch	pplication by Foreign Limited Liability Conneck are submitted to register the above references.	mpany for Authorization to Transact Business in Florida," Certificate of erenced foreign limited liability company to transact business in Florida.			
Please return all	correspondence concerning this matter to the	ne following:			
	С	ane Jeurissen			
		Name of Person			
	Patri	ot Core Supply, LLC			
		Firm/Company			
	16295	S Tamiami Trail #288			
	Address				
	Foi	t Myers, FL 33908			
	City	/State and Zip Code			
	_	patriotcoresupply.com			
_	E-mail address: (to be us	sed for future annual report notification)			
For further inform	mation concerning this matter, please call:				
Dane	Jeurissen	at (708) 308-4362			
	Name of Contact Person	Area Code Daytime Telephone Number			
•	Address:	Street Address:			
-	ration Section	Registration Section			
Divisio	on of Corporations	Division of Corporations			
P.O. B	ox 6327	The Centre of Tallahassee			
Tallah	assee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Please n	d is a check for the following amount: nake check payable to: FLORIDA DEPA .00 Filing Fee \sum \$130.00 Filing Fee & Certificate of \$150.00	\$155.00 Filing Fee & S160.00 Filing Fee, Certificate			

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

(If name unavailable, enter alternate i	name adopted for the purpose of transacting business in F	orida. The i	lternate name must include "Limited Liability Compan	y," "L.L. C," c	x "LLC.")	
2. Texas		3.	83-2112066	, 		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number, if applicable)			
₄ 07/01/2021						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ					
5. 15621 Blackhawk Drive		6.	16295 S Tamiami Trail #288			
(Street Address of Principal Office)			(Mailing Address)			
Fort Myers, FL 33912			Fort Myers, FL 33908			
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT 8	cceptable)	* 30 ^d	- 3 821 JUL -9	
Name:	Dane Jeurissen			ار است. خگاری	70	į
Office Address:	15261 Blackhawk Drive			\$ 50 50 50	H 1:00	(
	Fort Myers		, Florida 33912	•	۳,	
	(City)		(Zip code)			
designated in this applica	tance: rgistered agent and to accept service of p tion, I hereby accept the appointment a ions of all statutes relative to the proper	s registe	red agent and agree to act in this cap	acity. I fu	ırther a	gree

(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: Name and Address: Title or Capacity: Name: Tiffany A. Jeurissen Name: Dane S. Jeurissen □Manager □Manager Address: 15261 Blackhawk Drive Address: 15261 Blackhawk Drive ☑ Member ☑Member Fort Myers, FL 33912 Fort Myers, FL 33912 □ Authorized □ Authorized Person Person □Other □Other_____ ___ Other_ Other Name: _Edward Lode Manager Name: □Manager Address: 18670 Cypress Haven Drive Address: □Member Fort Myers, FL 33908 ☐ Authorized ☐ Authorized Person Person □Other____ □Other ____ Other____ Other Name: _____ Manager Manager □Member Address: _____ □Member ☐ 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.

Signature of an authorized person

Typed or printed name of signee

DANE S. JEURISSEN

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



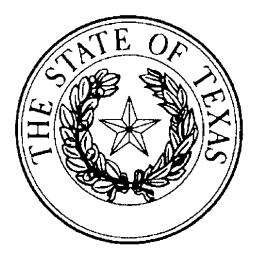
Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Patriot Core Supply, LLC (file number 803134093), a Domestic Limited Liability Company (LLC), was filed in this office on October 04, 2018.

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 July 02, 2021.



Phone: (512) 463-5555

Jose A. Esparza
Deputy Secretary of State