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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Phone

Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

Foreign Limited Liability Company Russell Capital Investments, LLC

Certificate of Status	0
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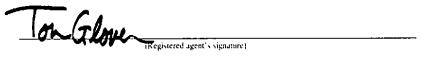
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Russell Capital	Investments, LLC Limited Liability Company; must include "Limited	Liability Comp	iny," "L.L.C" or "LLC.")		
(,			,		
If name mavailable, enter alternate n	ame adopted for the purpose of transacting business in Flor	oda. The ∡lternate m	une must orciude "Lornted Lizbility (company," "L.L.C," or "LLC")	
, New Mexico		、87	3. 87-1601047		
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, (f'applicable)			
1					
7.	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605,0905, F.S. to determine	egistration) ne penalty hability)		_	
41 JUDY PL		₂ 790	7901 4th St N STE 300		
5. (Sirect Address of I	Principal Office)	6.	(Mailing Address)		
-					
KEY LARG	O FL 33037	St.	Petersburg, I	=L 33702	
				<u> </u>	
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT accepts	ble)	· (
Name:	Northwest Registered Ag	ent LLC		~~	
	7901 4th St N STE	= 300			
Office Address:	7901 4111 3111 311	_ 500		48 .	
	St. Petersburg		. Florida 33702	္ငံေတြ (O	
	(Cny)		(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 um familiar with and accept the obligations of my position as registered agent.



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: Alison Smith Name: Douglas Smith Manager Manager Address: 41 JUDY PL Address: 41 JUDY PL Member Member KEY LARGO FL 33037 KEY LARGO FL 33037 Authorized Authorized Person Person Other Other____ Other_ Other_ Manager Manager Name: Manager Member Address: Member Address: Authorized Authorized Person Person Other____ Other_ Other____ Other_ Name: Manager Manager Name: Manager 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. 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. Morgan Noble

Typed or printed name of signee



Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

Russell Capital Investments, LLC 6532730

the above named entity, a Company organized under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Limited Liability Company, under the

Limited Liability Company Act

53-19-1 to 53-19-74 NMSA 1978

having filed its Articles of Organization on July 8, 2021, and Certificate of Organization issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: July 14, 2021

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.

> Maggie Dulouse Olin Maggie Toulouse Oliver Secretary of State