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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone Fax Number

: (307)200-2803 : (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.

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Foreign Limited Liability Company DAM THOUGHTS, LLC

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AUG 12 2021

M. SOLOMON

Electronic Filing Menu Corporate Filing Menu

Help

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 TUMFIED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: DAM THOUGHTS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "E.L.C," or "LEC") Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) Wesley Chapel FI 33543 Wesley Chapel FI 33543 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 7901 4th St N STE 300 Office Address: St. Petersburg

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.

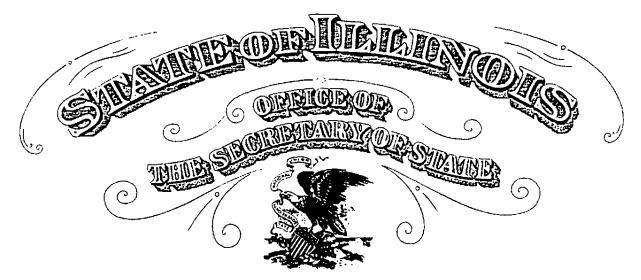
Bell Have
(Registered agent's signature)

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: David Martin Manager Name: Manager 1418 Highwood Pl Address: Member Member Wesley Chapel FI 33543 Authorized Authorized Person Person Other____ Other_ Other____ __Other_ Manager Manager Name: Manager Name: Member Member Address: Address: Authorized Authorized Person Person Other_ Other_ Other_____ Other_ Manager Manager Name: Manager Address: Member 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. 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. Riley Park

Typed or printed name of signee

File Number

0368196-3



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

DAM THOUGHTS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 26, 2011, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 10TH day of AUGUST A.D. 2021 .

Authentication #: 2122201778 verifiable until 08/10/2022

Authenticate at: http://www.ilsos.gov

Desse White

SECRETARY OF STATE