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#### **COVER LETTER**

TO:

Registration Section **Division of Corporations** 

Purposeful Living, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Peter McFarland	
Name of Person	
Long Law Group, LLC	
Firm/Company	<u> </u>
44 Cook Street, Suite 255	
Address	
Denver, Colorado 80206	
City/State and Zip Code	;
omcfarland@longlg.com	
E-mail address: (to be used for future annual report notification)	_ ;•

For further information concerning this matter, please call:

### Peter McFarland

Name of Contact Person

Daytime Telephone Number

#### **MAILING ADDRESS:**

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

#### **STREET ADDRESS:**

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

# 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/TOTRANS/ACT BUSINESS IN THE STATE OF FLORIDA:

Purposeful Livi	ng, LLC	clude "Lymited Lyability	· Congany ""Cl. C	" or "t   / ' ''			
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Colorado  Ourscheton maker the law of which foreign limited hability company is organized)			orida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC."  3. (FEI number, if applicable)				
í	(Date first transacted business in Pf (See sections 605 0903 & 605 0905	onda, if prior to registration	) aability )		_	-	
5. 44 Cook Street (Street Address of Principal Office)			44 Coo	k Stree	t		
Suite 255			Suite 255				_
Denver, Colorado 80206		_	Denver,	Colorad	08 ob	206	- 5
7. Name and <u>street addres</u>	ss of Florida registered agent:	(P.O. Box NOT a	cceptable)			23 PH	3
Name:	ered Agent L	LC	,		3: 16	. gr	
Office Address:	7901 4th St	00					
	St. Petersburg		, Florida	, Florida 33702		·	
	(C	'ay)		(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.

Ton Glove

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: Name: Travis Gentry Manager Manager Manager Name: Address: 44 Cook Street Member Address: Suite 255 Authorized ☐ Authorized Denver, Colorado 80206 Person Person Other Other\_\_\_\_ Other Other Manager Name: Manager | Name: \_\_\_\_ ☐ Member Address: \_\_\_\_\_ Member Address: ☐ Authorized Authorized Person Person Other\_\_\_ Other\_\_\_\_ Other\_ Manager 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. 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, third degree felony as provided for in s.817.155, F.S. Signature of an authorized person Peter McFarland

Typed or printed name of signee

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

## CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Purposeful Living, LLC

#### is a

#### Limited Liability Company

formed or registered on 01/10/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131022606.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/03/2021 that have been posted, and by documents delivered to this office electronically through 08/04/2021 @ 13:55:44

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 08/04/2021 @ 13:55:44 in accordance with applicable law. This certificate is assigned Confirmation Number 13347453



Jena Yuswall:

Secretary of State of the State of Colorado

\*\*\*\*\*\*\*\*End of Certificate\*\*