| * |
|-------|
| L _ / |
| |

M21000014258

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| |
| |
| (Business Entity Name) |
| (,, |
| (Document Number) |
| |
| Cadified Casies Cadificates of Status |
| Certified Copies Certificates of Status |
| r |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| warcoold4739 |
| |
| Office Use Only |
| |



09/29/21--01004--007 +*638.75

07/19/21--01020--001 (**125.00



OCT 2.7 2021 K. Brumbley

COVER LETTER

TO: Registration Section Division of Corporations

Rambler Concepts LLC

SUBJECT:

.

.

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:

| | Name of Person |
|--|--|
| Rambler Concepts LLC | |
| | Firm/Company |
| 10124 Knoll Circle | |
| | Address |
| Highlands Ranch, CO 80130 | |
| C | ity/State and Zip Code |
| kelly@thekatalystpartners.com | |
| E-mail address: (to be | e used for future annual report notification) |
| her information concerning this matter, please cal | 11: |
| | |
| ther information concerning this matter, please cat | |
| ther information concerning this matter, please cal Name of Contact Person Mailing Address: | |
| Name of Contact Person | at () Area Code Daytime Telephone Number <u>Street Address:</u> Registration Section |
| Name of Contact Person <u>Mailing Address:</u> Registration Section Division of Corporations | at () Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations |
| Name of Contact Person Mailing Address: Registration Section | at () Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee |
| Name of Contact Person <u>Mailing Address:</u> Registration Section Division of Corporations | at () Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 |
| Name of Contact Person <u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 | at () Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee |
| Name of Contact Person <u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: | at () Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |
| Name of Contact Person <u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | at () Area Code Daytime Telephone Number Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |

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:

(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")

1. Rambler Concepts LLC

| name unavailable, enter alternate | name adopted for the purpose of transacting business in Flo | orida. The | alternate name must include "Limited Liab | ility Company," "LiLiC," or "LU | |
|---------------------------------------|--|---------------------------|---|--|--|
| Colorado | | 3. | 37-1953127 | | |
| (Jurisdiction under the law of w | hich foreign limited liability company is organized) | 2. | (FEI number. | , if applicable) | |
| 2020 | | | | | |
| | (Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determin | egistration ne penalty | a) liability) | | |
| 10124 Knoll Circle | | 6. | 10124 Knoll Circle | | |
| reet Address of Principal Office) | | 0. | (Mailing Address) | · · · | |
| Highlands Ranch, CO | 80130 | | Highlands Ranch. CO 80130 | | |
| | | | | · · · · · · · · · · · · · · · · · | |
| | | | | | |
| | | | | | |
| | | | | <u>.</u> | |
| Name and <u>street addre</u> | ss of Florida registered agent: (P.O. Box | <u>NOT</u> a | acceptable) | | |
| Name and <u>street addre</u> | | <u>NOT</u> : | acceptable) | 2021 S | |
| Name and <u>street addre</u> Name: | ss of Florida registered agent: (P.O. Box URS AGENTS. LLC | <u>NOT</u> : | acceptable) | 2021 SEP | |
| | | <u>NOT</u> : | acceptable) | 2021 SEP 17 SECUETARY O TALLAHASSEE | |
| | URS AGENTS. LLC | <u>NOT</u> : | acceptable) | FILED 2021 SEP 17 PH SECRETARY OF S TALLAHASSEE, PL | |

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. URS Agents, LLC

Amy Purdy, Assistant Secretary By: Amy ywdu (Registered agent's signatur

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: | <u>Title or Capacit</u> | <u>v:</u> | Name and Address: |
|--------------------|---------------------------|-------------------------|-----------|-------------------|
| ■Manager | Name: Boris Katsnelson | | Name: | |
| □Member | Address: | Member | Address: | |
| Authorized | Highlands Ranch, CO 80130 | Authorized | | |
| Person | | Person | | |
| Other | Other | Other | | Other |
| □Manager | Name: | □Manager | Name: | |
| □Member | Address: | □Member | Address: | |
| Authorized | ,, | Authorized | | |
| Person | | Person | | |
| □Other | Dther | 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.

| M | |
|-----------------------------------|--|
| Signature of an authorized person | |
| Boris Katsnelson | |
| Lyped 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.

Rambler Concepts LLC

is a

Limited Liability Company

formed or registered on 09/04/2019 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 20191715928.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/24/2021 that have been posted, and by documents delivered to this office electronically through 06/25/2021 @ 10:15:41.

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 06/25/2021 @ 10:15:41 in accordance with applicable law. This certificate is assigned Confirmation Number 13261152



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. <u>Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate</u>. For more information, visit our Web site, http:// www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."