2021-11-16 10:41:20 CST

From Kaity Toon

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Division of Corporations

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Foreign Limited Liability Company L.A. Brands LLC

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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. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

		Company," "L.L.C," or "LLC.")
	32-0432593	
foreign limited hability company is organized)	(FEI nuieber, if a	upplicable)
(Date first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S., to determin	egistration.) se penalty liability)	-
	1717 N Naper Blvd STE 203	
 _	6. (Marting Address)	
Medley, FL 33178		2021 SEC TALL
 _		AHR NO
		
of Florida registered agent: (P.O. Box C T Corporation System	NOT acceptable)	PH 2: 14 FOR STATE EE, FLORIDA
200 South Pine Island Road		
Plantation	33324	
(City)	(Zip code)	_
	Obta first transacted business in Florida, if prior to re (See sections 603.0904 & 603.0905, F.S., to determine of Florida registered agent: (P.O. Box C T Corporation System	(Outs first transacted business in Florida, if prior to registration.) (See sections 603.0904 & 605.0905, F.S. to determine penalty liability) 1717 N Naper Blvd STE 203 6. (Mathag Address) Naperville, IL 60563 C T Corporation System 200 South Pine Island Road Plantation 33324 Florida

Page: 4 of 5

8.	For	initial indexing purposes	s, list names, title or c	capacity and addresses	of the primary mem	bers/managers or pe	rsons authorized to
mar	nage	[up to six (6) total]:					

Title or Capacity:	Name and Address:	Title or Capacity	<u>":</u>	Name and Address:
☐Manager	Name: Thatcher Limited Partnership	□Manager	Name:	
■Member	Address:	□Member	Address:	
□Authorized	Ste 203	□Authorized		
Person	Naperville, 1L 60563	Person		
Other	Other	□Other	<u></u>	Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
Other	Other	Other		Other
□Manager	Name:	Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized	<u> </u>	□Authorized		
Person		Person		
□Other	□ Other	Other		Other

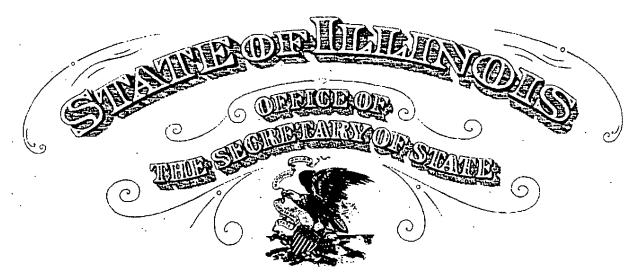
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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.

Jali 1a	Lew			
	Signature of an authorized person			
Laura Weiss				
Turned or commed name of signer				

File Number

0463651-1



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

L.A. BRANDS LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 13, 2014, 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 8TH day of NOVEMBER A.D. 2021.

Authentication #; 2131203188 verifiable until 11/08/2022

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

Desse White

SECRETARY OF STATE