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## COVER LETTER,

		COVERTELLER			
	Registration Section Division of Corporations				
SUBJEC	Star Rush, LLC				
30110120		e of Limited Liability (	Company		
	osed "Application by Foreign Limited Liability (e., and check are submitted to register the above to				
Please re	turn all correspondence concerning this matter to	o the following:			
	Ceil G. Petersson				
		Name of Person		<del></del>	
	Cushing, Morris, Armbruster & Montg	gomery, LLP			
		Firm/Company		_	
	191 Peachtree Street, N.E Suite 4500	0		707	
		Address	32		-17
	Atlanta, Georgia 30303		- 1787 - 178 - 178	2021 NOV 24 PM 3: 41	
	C	ity/State and Zip Code	;	<u></u>	
	shannon@sjeventures.com		( (	F	- Anna
	E-mail address: (to be	used for future annual	report notification)	<b>一</b>	
For furth	er information concerning this matter, please cal	il:		·	
	Ceil G. Petersson	404 at (	521-2323		
•	Name of Contact Person	Area Code	Daytime Telephone Numbe	<u> </u>	
	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

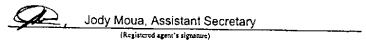
## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0802, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Star Rush (DE), LLC	n Limited Liability Company; must include "Llinited Liab		
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Florida, Tr	se alternate name must include "Limited Liability Comp	pany," "L.L.C." or "LLC.")
Delaware 2. (Jurisdiction under the law of a	which foreign lumited liability company is organized)	3(FEI number, if applie	
	organization and the company is degarated.	(FEI number, if applic	:able)
4	(Date first transacted business in bloods of six and six	····	
	(Date first transacted business in Florids, if prior to registra (See sections 605.0904 & 605.0905, F.S. to determine pena	ignt ) Ity liability)	
5. 1115 Howell Mill Ro		5	
(Super Address of	Principal Office)	(Mailing Address)	
Suite 360	<del></del>		27
Atlanta, Georgia 303	18		2021 NOV 24
7. Name and <u>street addre</u>	ss of Florida registered agent: (P.O. Box NOT	_acceptable)	P. II
Name:	Paracorp Incorporated		3: 46 5: ATE E.FL
Office Address:	155 Office Plaza Drive, 1st Floor		
	Tallahassee	32301 	
	(City)	(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.



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	<u>.</u>	Name and Address:
Manager	Name: Star Rush Manager, LLC	Manager	Name:	
Member	Address: 1115 Howell Mill Road, N.W.	Member		
Authorized	Suite 360	☐ Authorized		
Person	Atlanta, Georgia 30318	Person		
Other	Other	Other		Other
Manager	Name: Jeffrey A. DeHart	☐ Manager	Name:	
Member	Address: 1115 Howell Mill Road, N.W.	Member		
Authorized	Suite 360	Authorized		
Person	Atlanta, Georgia 30318	Person		
Other	Other	Other		Other
				2821 NOV
<b>∏</b> Manager	Name:	Manager	Name:	
□Member	Address:	Member	Address:	
Authorized		Authorized		<u> </u>
Person		Person		<u> </u>
Other	Other	Other_		Other on

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 a wordance 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.

Signature of an authorized person

Jeffrey A. DeHart

## <u>Delaware</u>

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STAR RUSH, LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE NINETEENTH DAY OF NOVEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STAR RUSH, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

TALLAHASSEE, FL



Jeffrey W. Buddock, Secretary of State

Authentication: 204748524