| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Registration Section

TO:

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| Divisio | on of Corporations | | | | | |
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| ♠ L0 | DCAL GREEN ORLANDO L | LC | | | | |
| SUBJECT: | | | | | | |
| | | | f Limited Liability (| Company | - | |
| The enclosed "A Existence, and c | Application by Foreign Limite theck are submitted to register | d Liability Co the above ref | mpany for Authoriza erenced foreign limi | ation to Transa ted liability co | act Business in Florida ompany to transact bus | a," Certificate of siness in Florida. |
| | correspondence concerning the | | | | | |
| | ROBYN WALLACE | | | | | |
| | | | Name of Person | | | |
| | LOCAL GREEN ORLAND | O LLC | | | | |
| | | | Firm/Company | <u>-</u> | | _ |
| | 2292 Ridgecrest La | ne | | | | |
| | | | Address | | | _ |
| | East Point GA 303 | 44 | | | | |
| | robyn@localgreenatla | City/ anta.com | State and Zip Code | | | _ |
| | E-mail add | ress: (to be us | ed for future annual | report notifica | ition) | _ |
| For further infor | mation concerning this matter | , please call: | | | | |
| ROBYN | WALLACE | | 404 | 5835440 | | |
| | N 67 | | at (| _) | | ~ |
| | Name of Contact Pe | rson | Area Code | Daytime | Telephone Number | |
| | Address: | | Street Address: | | | |
| Registration Section | | Registration Se | | | | |
| Division of Corporations | | | Division of Corporations | | | |
| P.O. Box 6327 Tallahassee, FL 32314 | | The Centre of | | | | |
| ranan. | assee, FL 32314 | | 2415 N. Monro Tallahassee, Fl | | iite 810 | |
| Please n | | amount: RIDA DEPAR Filing Fee & ertificate of Si | □ \$155.00 Fili | | 図 \$160.00 Filing Fee. of Status & Cer | |

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: LOCAL GREEN ORLANDO 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," "L.L.C," or "LLC.") GEORGIA (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 3050 Martin Luther King Jr Drive 2292 Ridgecrest Lane 5. (Street Address of Principal Office) (Mailing Address) Atlanta GA 30311 East Point GA 30344 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Dougal Myers Name: 2220 Flager Promenade Way #308 Office Address: Maitland 32751 _____, Florida (City) 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. DocuSigned by: Dougal Myers

7A66139D064FRigistered 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]:

| Title or Capacity: | <u>Name and Address:</u> Zachary Wallace | Title or Capacity: | | Name and Address: | |
|--------------------|--|--------------------|---------------|-------------------|--|
| XI Manager | Name: | □Manager | Name: | | |
| □Member | 2292 Ridgecrest Lane Address: East Point GA 30344 | □Member | | | |
| □Authorized | —————————————————————————————————————— | □Authorized | | | |
| Person | | Person | | - | |
| □Other | Other | □Other | | Other | |
| ∃Manager | Name: | □Manager | Name: | | |
| □Member | Address: | □Member | | | |
| □Authorized | | □Authorized | | | |
| Person | | Person | | | |
| □Other | Other | □Other | _ | Other | |
|] Manager | Name: | □Manager | Name: | | |
| □Member | Address: | □Member | Address: | | |
| Authorized | | □Authorized | | | |
| Person | | Person | | | |
| □Other | Other | □Other | | □Other | |

ien 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.

| DocuSigned by: | <i>y</i> - p·· · · · · · · · · · · · · · · · · · |
|-----------------|--|
| Eak Wallace | |
| D:86942F3C48442 | Signature of an authorized person |
| Zachary Wallace | |
| · | Typed or printed name of signer |

Control Number: 21260607

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Local Green Orlando LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 22098631
Date Inc/Auth/Filed: 10/04/2021
Jurisdiction : Georgia
Print Date : 11/30/2021

Form Number : 211



Brad Raffensperger