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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: REGISTERED AGENTS INC.

Phone

Account Number : I20090000081 : (307)200-2803

Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		
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Foreign Limited Liability Company Environ Technologies LLC

Certificate of Status	0
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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:

Myomina		87-39710	20	
Wyoming (Jurisdiction under the law of w	high foreign limited liability company is organized			
	(Date first transacted business in Florida, if (See sections 605,0904 & 605,0905, F.S. to	prior to registration) a determine penalty hability)		
5011 Gate	•	6. 5011 Gate Parkway		
	0, Suite 100		0, Suite 100	
Jacksonvi	lle FL 32256	Jacksonvi	lle FL 32256	
Name and street addre	ss of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	22	
Name:	Registered Age	ents Inc.	AH II: 23	
Office Address	7901 4th St N :	STE 300	: 23 TATE	
	St. Petersburg	. Florida 33	702	

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: Name and Address: Matthew Andrews Name: ______ Manager Manager Manager Address: 3114 Inishmore Drive Member Address: Member Ormond Beach Authorized Authorized FL 32174 Person Person Other_ Other____ Other____ Other___ Name: _____ Name: ______ Manager Manager Member Address: Member Address: Authorized Authorized Person Person Other____ Other_ Other____ Other Name: Name: _____ Manager Manager Address: Member | Member Address: Authorized Authorized Person Person 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 a third degree felony as provided for in s.817.155, F.S. Riley Park

Lyped or printed name of signee

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office.

Environ Technologies LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **December 8, 2021**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2021-001058912**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 22nd day of December, 2021 at 8:31 AM. This certificate is assigned ID Number 048779845.

Socretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.