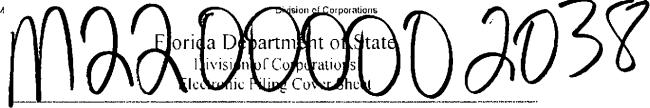
Page: 3 of 6

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From: Lexus Wingo

2/8/22, 1:18 PM



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(((H220000512343)))



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	Fax Number : (850)617-638.	3		
From:				
	Account Name : C T CORPORAT:	ION SYSTEM		
	Account Number : FCA000000023	~		
	Phone : (614)573-3996 Fax Number : (954)208-084			SECRETE TALL AH
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Electronic Filing Menu

Corporate Filing Menu

Help

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

From: Lexus Wingo

IN COMPLIANCE BYTH SECTION (05.0/02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(II name unavailable, enter alternate n	taine adopted for the purpose of transacting business in Hi	ovida The sh	ernate name must include "Eunited Euclidal	ly Company," "L. L.C.," or "L.C.	.")
Delaware 2.		3.			
(Jurisdiction under the law of w	high foreign limited liability company is organized)	٠	(FBI number, i)	(5 desilação	
4,		_			
	(Date that transacted business in Florida, if prior to a (See sections 605 6904 & 605,0905, F.S. to determine	registration) no penalty lia	ability i		
200 S. Biscayne Blvd		_ 2	00 S. Biscayne Blvd		
Street Address of Principal Office)		0	(Mailing Address)		
20th Floor		2	Oth Floor		
Miami, FL 33131	-	Ν	diami, FL 33131	2022 SEI	
7. Name and street address	is of Florida registered agent: (P.O. Box	<u>NOT</u> ac	ceptable)	CRETAR AHASS	
	C T Corporation System			8 PM S SEELFLO	
Name:					-
Name: Office Address.	1200 South Pinc Island Road			5: 56 STATE .ORIDA	
			 33324 . Florida	<u> </u>	
			33324 , Florida(Zip.code)	<u> </u>	

(Registered agent's signature)

usura Brodensk Amustala Secretary 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: Matthew Bielski	□Manager	Name:	
□Member	Address: 200 S. Biscayne Blvd	□Member	Address:	
□Authorized	20th Floor	□Authorized		
Person	Miami, FL 33131	Person		
Other	Other	Other		□ 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		□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.

/s/ Matthew Bielski	
	Signature of an authorized person
Matthew Bielski	
	Typed as acinted name at sinner

Delaware The First State

Page 1

From: Lexus Wingo

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

DELAWARE, DO HEREBY CERTIFY "DEFIANCE INVEST, 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 EIGHTH DAY OF FEBRUARY, A.D. 2022.

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

Authentication: 202601823

Date: 02-08-22

6261355 8300 SR# 20220411044

You may verify this certificate online at corp.delaware.gov/authver.shtml