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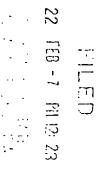
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T. LEMIEUX FEB 17 2022

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	DRIXIT LLC ECT:			
	Name of	Limited Liability Company		
The en Exister	nclosed "Application by Foreign Limited Liability Comnee, and check are submitted to register the above refer	npany for Authorization to Transact Business in Florida," Certificate of renced foreign limited liability company to transact business in Florida.		
Please	return all correspondence concerning this matter to the	e following:		
	SWETA JAIN			
	<u> </u>	lame of Person		
	ICOFIN USA INC			
Firm/Company				
Address				
	NEWARK, DE 19711			
	City/S	State and Zip Code		
	sweta@keystonefamilyoffice.com			
	E-mail address: (to be use	d for future annual report notification)		
For fur	rther information concerning this matter, please call:			
	Sweta Jain	302 994-2000 Ext 309		
	Name of Contact Person	Area Code Daytime Telephone Number		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPAR \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Sta	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate		

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:

	name adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited List	bility Company," "L.L.C," or "LL
DELAWARE		85-2719821 3.	
(Jurisdiction under the law of s	which foreign limited liability company is organized)	(FEI number	r, if applicable)
	(Date first transacted business in Florida, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine	istration.) penalty liability)	
777 Brickell Ave Ste	1210	777 Brickell Ave Ste 1210	
t Address of Principal Office)		O. (Mailing Address)	<u> </u>
MIAMI, FL 33131		MIAMI, FL 33131	
· ·			
			22
Vame and street address	ss of Florida registered agent: (P.O. Box 1)		· · · · · · · · · · · · · · · · · · ·
Name:	MB7 CORPORATE SERVICES LLC	<u>(QT</u> acceptable)	B - 7 P
		<u>(Q F</u> acceptable)	1 LED 27 81 2: 27
Name:	MB7 CORPORATE SERVICES LLC	33131	-7 PI
Name:	MB7 CORPORATE SERVICES LLC 777 BRICKELL AVE STE 1210 MIAMI (City)		-7 PI

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: Name: Alejandro Curiel □Manager □Manager Name: _____ 535 Baltimore Pike □Member Address: □Member Glen Mills, PA 19342 **Authorized** □ Authorized Person Person □Other____ □Other _____ □Other_____ □Other_____ □Manager Name: □Manager □Member ☐ Member Address: Address: ☐ Authorized ☐ Authorized Person Person □Other____ □Other____ □Other □Other Name: □Manager Name: □Manager ☐Member Address: ☐ 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.

Typed or printed name of signee

Alejandro Curiel

Page 1



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

DELAWARE, DO HEREBY CERTIFY "DRIXIT 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 TWENTY-SEVENTH DAY OF JANUARY, A.D. 2022.

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

Authentication: 202509045

Date: 01-27-22