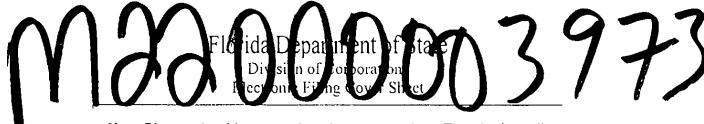
Division of Corporations

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000097033 3)))



H220000970333ABC-

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20090000045 Phone : (302)645-7400 Fax Number : (302)645-1280

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

Email Address: debbie.mondello@darwin.cx

Foreign Limited Liability Company Darwin CX, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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(((H22000097033 3)))

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

IN COMPLIANCE WITH SECTION (05 000), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED LIABILITY. COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDAL

	ame adepted for the purpose of transacting business in Flori	da. The alternate name must include "Lurated Lta	bility Company," "L.I. C," or "LLC
Defaware		85-1081859 3	
(Jurisdiction under the law of w	nich foreign limited hability company is occanized)	(FFI munbe	r, if applicable)
February 1, 2022			
	(Date first transacted business in Florida, if prior to representing for 0901 & 0405 0905, F.S. to determine	benutz papilist Baration I	
11 Commerce Blvd.		11 Commerce Blvd	
eet Address of Principal Office)		6. (Mailing Address)	
Palm Coast, FL 32164		Palm Coast, FL 32164	
Name and street address	s of Florida registered agent: (P.O. Box.)	NOT acceptable)	2022 MAR SECRETA
Name:	Registered Agents Inc.		AR 16 ETARY HASSE
	7901 4th Street N, Ste 300		
Office Address:		33702	3: 30 STATE LORIDA
Office Address:	St. Petersburg	, Florida	

and accept the obligations of my position as registered agent.

(((H22000097033 3)))

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:	control and within (22):	Title or Capaci	<u>ty:</u>	Name and Address:
■Manager	Name: Liam Lynch	■Manager	Name;	
■Member	Address: 327 W. 101st Street,	□Member		
☐ Authorized	New York, NY 10025	□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		
□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 outh 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.

	Lion Lynch	
	Signature of an authorized person	
Liam Lynch		
	Typed or printed name of signee	
	(((H22000097033 3)))	

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The First State

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

DELAWARE, DO HEREBY CERTIFY "DARWIN CX, 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 FIFTEENTH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DARWIN CX, LLC" WAS FORMED ON THE FIFTEENTH DAY OF MAY, A.D. 2020.

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

7972201 8300 SR# 20221010009

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

Jenray W. Bulleck, Secretary of Stale

Authentication: 202915942

Date: 03-15-22