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#### COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	ASUSA Professional LLC				
50202		Name of Limited Liability Company			
		Liability Company for Authorization to Transact Business in Florida," Certificate of e above referenced foreign limited liability company to transact business in Florida.			
Please 1	return all correspondence concerning this	matter to the following:			
	Tracy Davis				
		Name of Person			
	ASUSA Professional LLC				
	Firm/Company				
	271 W. 1st St.				
	Address				
	Eureka, MO 63025				
	City/State and Zip Code				
	tracyd@asusa1.com				
	E-mail addre	ss: (to be used for future annual report notification)			
For furt	her information concerning this matter, p	dease call:			
Tracy Davis		314 502-1556			
	Name of Contact Perso	on 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 at Please make check payable to: FLORII  ☐ \$125.00 Filing Fee ☐ \$130.00 F  Cer	DA DEPARTMENT OF STATE			

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA;

	name adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited Liability Company," "L.L.C." or "LI
Missouri		81-2108639 3.
(Jurisdiction under the law of w	thich foreign limited liability company is organized)	3. (FEI number, if applicable)
February 7, 2022		
	(Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine	egistration ) ee penalty liability)
9495 Puckett Rd.		271 W. 1st St.
eet Address of Principal Office)	<del></del>	6. (Marling Address)
Perry, FL 32348		Eureka, MO 63025
	ss of Florida registered agent: (P.O. Box  Jared Birmingham	NOT acceptable)
Name and street address  Name:  Office Address:		
Name:	Jared Birmingham	NOT acceptable)

Jared Birmingham
(Registered 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: Name and Address: Title or Capacity: Name and Address: Name: Keith Waldrop Name: \_ John Wall Manager □ Manager Address: \_\_ 271 W. 1st St. Address: 271 W. 1st St. □Member ■ Member Eureka, MO 63025 Eureka, MO 63025 Authorized □ Authorized Person Person Other Other ☐ Other Other\_\_\_\_ Name: \_\_ □Manager □ Manager Name: \_\_\_\_ 271 W. 1st St. □Member □Member Address: Eureka, MO 63025 □ Authorized □ Authorized Person Person ■Other\_CFO □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. 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

Tracy Davis

# STATE OF MISSOURI



### John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

ASUSA Professional, LLC LC001485681

was created under the laws of this State on the 28th day of March, 2016, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 14th day of February, 2022.

Secretary of State

Certification Number: CERT-02142022-0070