5/2/22, 7:14 AM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: LEGALZOOM.COM INC. Account Name

Account Number : I20010000062

Phone

: (323)962-8500

Fax Number

: (323)962-3889

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

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Empil.	Address:				
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Foreign Limited Liability Company Chiefs Tech LLC

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COVER LETTER

Cl JECT:	niefs Tech LLC					
JECT:	Name of Limited Liability Company					
stence, and c	Application by Foreign Limited Liability Comparable Kare submitted to register the above reference	ed foreign limit	ted liability company to transact business in			
se return all	correspondence concerning this matter to the fo	Howing:	ME.			
	Cheyenne Moseley					
	Nan	ne of Person				
	Legalzoom.com, Inc.					
	Fim	vCompany				
	101 N Brand Blvd 11th Fl					
	Address					
	Glendale, CA 91203					
	City/State and Zip Code					
	nelsonomuto@gmail.com					
	E-mail address: (to be used	for future annua	report notification)			
further into	mation concerning this matter, please call:					
Cheye	enne Moseley	800	773-9888			
	Name of Contact Person	at (Area Code	Daytime Telephone Number			
Divisi Regist	JNG ADDRESS: on of Corporations tration Section 3ox 6327 tassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Enecutive Center Circle Tallahassee, FL 32301			

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r;

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 TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f'name unavailable, enter alternate na	me adopted for the purpose of transacting business in Flo	rida The alternate r	name must include "Limited Linbility Con	npuny." "L.L.C." or "LLC.")	
Georgia		84-5	5071397		
_	oh foreign linuted liability company is organized)	3. (18.1 manber, il applicable)			
·	(Date first transacted business in Florida, if prior to (See sections 605 0903 & 605 0905, F.S. to determ	registration) inc penalty limbility)		
(Street Address of P	rincipal (Mice)	6	(Mathing Address)		
1765 Landess Ave., #1002		1765	Landess Ave., #1002	3	
Milpitas, California 95035		Milp	oitas, California 95035	2022 HAY	
Name and street address	s of Florida registered agent: (P.O. Box	NOT accep	table)	-2	
UNITED STATES CORPORATION		AGENTS, I	NC.	PM 3: 46 3866, FL	
Office Address:	5575 S. Semoran Blvd., Suite 36		_	·	
	Orlando		32822 , Florida		
	(Cuy)		(Zip code)	=	

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 egistered agent.

CHEYENNE MOSELEY, ASSISTANT SECRETARY, UNITED STATES CORPORATION AGENTS, INC.

(Registered agent's signature)

From: Laura Rodriguez

Authorized

Person

Other

2022-05-02 05:17:04 PDT

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Nelson Omuto Manager Name: Manager Address: __ 1765 Landess Ave., #1002 Mcmber Address: Member Milpitas, California 95035 Authorized ☐ Authorized Person Person Other____ Other____ Other_ Other Name: Name: Manager Manager Manager ☐ Member Address: Address: ______ Authorized Authorized Person Person Other____ Other____ Other__ Other_ Name: Manager | Manager Member Address: Member Address:

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.

Other_____

Authorized

Person

Other

Other____

- 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 \$.817.155, F.S.

Nigrature of an authorized person. Nelson Omuto Typed or printed name of signee

Control Number: 20034215

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

> Chiefs Tech LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application, for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number : 23162347 Date Inc/Auth/Filed: 03/05/2020 Jurisdiction : Georgia : 05/02/2022 Print Date

Form Number : 211

Brad Raffensperger



Brad Raffensperger Secretary of State