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COVER LETTER

_	nemian Blowfish Bungalow LLC	
	Nam	e of Limited Liability Company
		Company for Authorization to Transact Business in Florida," Certific referenced foreign limited liability company to transact business in F
return all o	correspondence concerning this matter t	o the following:
	Krista Goxdrich as Manager	
		Name of Person
	Island Dreams Investments LP	
		Firm/Company
	2800 S. Peninsula Drive	
		Address
	Daytona Beach FL 32118	
	C	ity/State and Zip Code
k	ristadowling77@gmail.com	
_	E-mail address: (to be	e used for future annual report notification)
ther inform	nation concerning this matter, please cal	II :
Krista G	oodrich	386 341-8557 at ()
i	Name of Contact Person	Area Code Daytime Telephone Number
	Address:	Street Address:
Registr Dibisio	ation Section on of Corporations	Registration Section
	ox 6327	Division of Corporations The Centre of Tallahassee
	issee, FL 32314	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303
	is a check for the following amount:	
Please m	ake check payable to: FLORIDA DEP 00 Filing Fee	PARTMENT OF STATE e & \$\Boxed{\Boxesia} \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\

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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. COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Bohemian Blowfish Bungalow LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "L.L.C." Delaware 87-4351602 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 5/1/2022 (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 3724 Cardinal Blvd 2800 S. Peninsula Drive 5. (Street Address of Principal Office) Daytona Beach, FL 32118 Daytona Beach FL 32118 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Kymberlee Nguyen Name: 2800 S. Peninsula Drive Office Address: Daytona Beach Registered agent's acceptance: 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 agregistered agent.

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: Island Dreams Investments LP Name: ___ Kymberlee Nguyen □ Manager □Managèr Address: 2800 S. Peninsula Drive Address: 2800 S. Peninsula Drive **■**Member ■ Member Daytona Beach FL 32118 Daytona Beach, FL 32118 ☐ Authorized ☐ Authorized Person Person □Other_____ □Other___ __ □Other □Other_____ ___ Name: _ Anh Nelson Name: Rebecca Dowling □ Manager □Manager Address: ____ Address: 2114 Dowling Drive ■Member **■**Member Buena Park CA 90621 Roswell GA 30075 □ Authorized ☐ Authorized Person Person □Other_____ □Other_ □Other_____ ☐ Other____ Krista Goodrich ■ Manager Manager Name: ______ 2800 S. Peninsula Drive □Member Address: □Member Daytona Beach FL 32118 ☐ 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. Signature of an authorized person

Typed or printed name of signee

Kymberlee Nguyen



Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BOHEMIAN BLOWFISH BUNGALOW 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 THIRD DAY OF MAY, A.D. 2022.

Authentication: 203336777

Date: 05-03-22