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COVER LETTER

TO:

°O:	Registration Section Division of Corporations						
UBJ	BRS Financial LLC						
Name of Limited Liability Company							
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.						
lease	return all correspondence concerning this matter to the following:						
	David A. Sims, Principal & CCO						
	Name of Person						
	BRS Financial LLC						
	Firm/Company						
	10800 Financial Centre Parkway, Suite 280						
	Address						
	Little Rock, AR 72211						
	City/State and Zip Code						
	dsims@brsconsulting.com						
	E-mail address: (to be used for future annual report notification)						
For fu	her information concerning this matter, please call:						
	David A. Sims 501 442-358 5						
	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 DEPARTMENT OF STATE \$\Bigsigma\$ \$125.00 Filing Fee \$\Bigsigma\$ \$130.00 Filing Fee & \$\Bigsigma\$ \$155.00 Filing Fee & \$\Bigsigma\$ \$160.00 Filing Fee, Certificate Certificate of Status \$\Bigsigma\$ Certified Copy						



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:

BRS FINANCIAL LLC

If name unavailable, enter alternate i	name adopted for the purpose of transacting business in F	lorida. The alter	nate name must include	"Limited Liability C	ompany," "L1,.C	," or "I.I.C	NT)
ARKANSAS 2.	hich foreign limited liability company is organized)	3	7-1225042	(FEI number, if app	steed to		
(1m) solicitos under the law of w	men menga namued namuny company is organized)			(r.e.i number, ii app	псаоне		
May 1, 2022 4							
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) ine penalty liabi	hıy)	-			
10800 Financial Centro 5.	e Parkway, Suite 280	6.			Ξ_{Ω}	20	
Street Address of Principal Office)			(Mailing Address)		7	~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Little Rock, AR 72211					75	12 JUN 21	
					SER		1
		_				2	-
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acce	eptable)		1.0810. 4.0180.	9: 00	C
Name:	Davie E. Sims						
Office Address:	418 The Circle						
	Longwood		32 , Florida	779			
	(City)			(Zip code)			

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 as registered 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: David A. Sims Gordon R. Jensen ■ Manager □ Manager Address: _____10800 Financial Centre Pkwy, 10800 Financial Centre Pkwy. ■ Member ■ Member Suite 280 Suite 280 Authorized Authorized Little Rock, AR 72211 Little Rock, AR 72211 Person Person □Other □ Other Other □Other Richard R. Jensen □Manager Name: Name: ______ □Manager 10800 Financial Centre Pkwy, ■Member Address: □Member Address: __ __ __ __ __ __ __ Suite 280 Authorized ☐ Authorized Little Rock, AR 72211 Person Person □Other___ □Other____ □Other □Other____ □Manager □Manager Name: _____ □Member □Member Address: __ __ _ 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 vection 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. of an aumorated person

Typed or printed name of signee

David A. Sims



Arkansas Secretary of State John Thurston

State Capitol Building ◆ Little Rock, Arkansas 72201-1094 ◆ 501-682-3409

Certificate of Good Standing
1, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

BRS FINANCIAL, LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office June 5, 2013.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 15th day of June 2022.

orization Code: 70eed0748cc3ceb Secretary of State To verify the Authorization Code, visit sos.arkansas.gov

In Thurston