

M2200 000 9985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

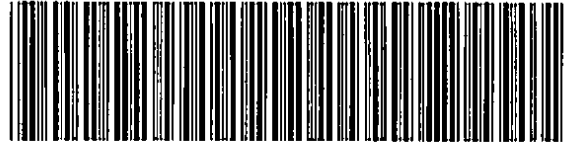
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2022 JUN 13 AM 11:06

FILED

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Just Drive Media, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Ali Winkle  
Name of Person

Just Drive Media LLC  
Firm/Company

755 Grand Blvd Ste B-105 #184  
Address

Miramar Beach, FL 32550  
City/State and Zip Code

ali@justdrivemedia.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ali Winkle at (510) 932-1878  
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**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & 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:

1. Just Drive Media LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

(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.")

2. State of Alabama  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 01-0878940  
(FEI number, if applicable)

4. April 18<sup>th</sup> 2022  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 396 Casa Grande Lane  
(Street Address of Principal Office)

6. 755 Grand Blvd Ste B-105 #184  
(Mailing Address)

Santa Rosa Beach, FL 32459

Miramar Beach, FL 32550

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Ali Winkle

Office Address: 396 Casa Grande Lane

Santa Rosa Beach, Florida 32459  
(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.

Ali Winkle  
(Registered agent's signature)

FILED  
2022 JUN 13 AM 11:00  
STATE OF FLORIDA  
TALLAHASSEE

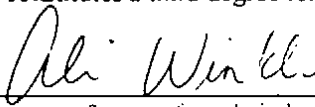
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Ali Winkle</u>	<input checked="" type="checkbox"/> Manager	Name: <u>John Winkle</u>
<input checked="" type="checkbox"/> Member	Address: <u>396 Casa Grande Lane</u>	<input checked="" type="checkbox"/> Member	Address: <u>396 Casa Grande Lane</u>
<input type="checkbox"/> Authorized Person	<u>Santa Rosa Beach, FL 32459</u> <u>Co founder, CEO</u>	<input type="checkbox"/> Authorized Person	<u>Santa Rosa Beach FL:</u> <u>Co founder, Creative Dire</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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 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

John H. Merrill  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Just Drive Media LLC was formed in Baldwin County, Alabama on October 22, 2014. The Alabama Entity Identification number for this entity is 000-320879. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20220610000002482

**In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.**

06/10/2022

Date

**John H. Merrill**

**Secretary of State**