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(Re	questor's Name)	
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S. ROBERTS AUG 1 2 2022

COVER LETTER

TO:	Registration Section Division of Corporations				
	NuMedia LLC				
SUBJ	ECT:	ne of Limited Liability Company			
	iNai	ne of Limited Diability Company			
The en	nclosed "Application by Foreign Limited Liability ence, and check are submitted to register the above	 Company for Authorization to Transact Business in Florida." Certificate of e referenced foreign limited liability company to transact business in Florida 			
Please	e return all correspondence concerning this matter	to the following:			
	Yannick Apers				
		Name of Person			
	N.A.				
	Firm/Company				
	2394 Britwell Pl.				
		Address			
	Sanford, FL 32773				
		City/State and Zip Code			
	apersyannick@gmail.com				
	E-mail address: (to	be used for future annual report notification)			
For fi	arther information concerning this matter, please of	call:			
	-				
		at () Area Code Daytime Telephone Number			
	Name of Contact Person	Area Code Daytime Telephone Number			
	Mailing Address:	Street Address:			
	Registration Section	Registration Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
	Tallahassee, FL 32314	Tallahassee, FL 32303			
	Customed is a shoot for the following amount				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE	EPARTMENT OF STATE			
	■ \$125.00 Filing Fee ■ \$130.00 Filing F	Fee & (=)\$155.00 Filing Fee & = \$160.00 Filing Fee, Certificate			
	Certificate	e of Status Certified Copy of Status & Certified Copy			

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

name unavailable, enter alternate Member-Managed	name adopted for the purpose of transacting business in Flo	orida. The alternate name must include	e "Limited Liabili	ty Company,"	"L.L.C," c	л " LLC."
17		3.	(FEI number, if	•		_
(Jurisdiction under the law of v	which foreign limited liability company is organized)		(FEI number, il	applicable)		
	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605 0905, F.S. to determine	egistration.)				
1170 Tree Swallow Dr		1170 Tree Swallov	v Dr. St. 373			
eet Address of Principal Office)		6. (Mailing Address)				
Winter Springs, FL 32		Winter Springs, FI	32708			
				.		
		<u> </u>				
Name and attract address	or of Blorida registered agent: (P.O. Boy	NOT acceptable)			2422	
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)		TALL.	2422 AUG	== \r. E
Name and street addre	ss of Florida registered agent: (P.O. Box Yannick Apers	<u>NOT</u> acceptable)	.,	TALLAL	2422 AUG 1	5 / 120 5 / 120 5 / 120 5 / 120 5 / 120
Name and street addre		<u>NOT</u> acceptable)	<u></u>	TALLAR T	12	Enc. 7,2 6 7 100 100 1
		NOT acceptable)		TALLA ESTA	2822 AUS 2 FH	Em 1/2 6 - 1/2 - 1
	Yannick Apers	<u>NOT</u> acceptable)		TALLAL STATE	12	Emir 12 E e rece e e e e e e e e e e e e e e e e e e
Name:	Yannick Apers		2773	TALLA BUT SALA	12	Emo 1/2 E sugar Sugar Sugar Vigar
Name:	Yannick Apers 2394 Britwell Pl.		2773	TALLALE THE LANGE	12 PH 4:4	12 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -

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: Yannick Apers Name: ______ □Manager □Manager Name: _ 2394 Britwell Pl. ☐ Member Address: _____ **∑**Member Address: ___ Sanford, FL 32773 Authorized □ Authorized Person Person □Other____ Other_____ Other____ Other □ Manager Name: □Manager Name: □Member Address: □Member Address: □ Authorized ☐ Authorized Person Person □Other____ □Other____ □Other _____ □Other _____ □Manager Name: _____ Name: □Manager □ 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. Signature of an authorized person

YAMMUK APERS





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

NuMedia LLC

ACC file number: 23157142

was incorporated under the laws of the State of Arizona on 01/01/2021, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave hereunto set my hand, affixed the official scal of the Arizona. Corporation Commission, and issued this Certificate on this date: 07/05/2022

Matthew Neubert, Executive Director



