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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

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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Foreign Limited Liability Company Lutz Technology, LLC

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S. FRANKLIN

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

	ted Liability Company; must include "Limited	Liebilia Comacus I'll I C Secol I C 9				
		Charles Company, 1.1.2, or 1.12.				
and the Carlotte of the Control of t						
EBRASKA	acopies: for the purpose of transacting outsiness at Fig.	rida. The alternate name must include "Limited Liability Comp. 20-4937067	may, M. L.C., or M.L.C.			
(Juriadiction under the law of which liverign limited liability company is organized)		3. (Ff3 nooiher, if applicable)				
 			~			
	(Date first ministered business in Florida, if prior to re (See sections 005 0904 & 605 0905, F.S., to determin	gristration.) e penalty liability)	W??			
Suite 300		Suite 300 6.	, -			
Address of Frincipal Office)	, \\-	(Mailing Address)				
13616 California Street		13616 California Street	بـ			
Omaha, NE 68154		Omaha, NE 68154				
Official, N. 00124		Ollialia, NE 00134				
'ama and ereas addraes of	f Florida registered agent: (P.O. Box	NOT generate blay	;			
ame and <u>succi appress</u> or	r Florida regisieren agene. (F.O. Dox	1501 acceptable)				
	2 T Corporation System					
Name:						
Office Address:	200 South Pine Island Road					
Plantation		33324				
	(City)	, Florida (Zipcok)				

8.	For initial indexing purp	oses, list names,	title or	r capacity	and addresses of	the primary	members/managers or persons au	thorized to
ma	nage [up to six (6) total];		٠.					

Title or Capacity:	Name and Address:	Title or Capacity	<u>u</u> .	Name and Address:
□Manager	Name: Mark Duren	■Manager		ve Roberts
	Address: 13616 California St	□Member		3516 California ST
□Authorized	STE 300	□Authorized		
Person	Omaha, NE 68154	Person	Omaha, NI	68154
[]Other	□Other □	Other		Oiher
□Manager	Name: Matthew Storm	. □Manager	Name:	
□Member	Address: 13616 Catifornia St		Address:	
© Authorized	STE 300	□ Authorized		65)
Person	Omaha, NE 68154		•	<u> </u>
□Other	Other	□Other		ັນ .
,				<u></u>
□Manager	Name:	□Manager	Name:	
[©] Member	Address:	□Member	Address: _	
□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. 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, daly 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 talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

1505	
•	Sig sature of an malionized person
Matthew Storm	·

STATE OF NEBRASKA

United States of America, State of Nebraska } ss.

Secretary of State State Capitol Lincoln, Nebraska

I, Robert B. Evnen, Secretary of State of the State of Nebraska, do hereby certify that

LUTZ TECHNOLOGY, LLC

was duly formed under the laws of Nebraska on November 14, 2001;

all fees, taxes, and penalties due under the Nebraska Uniform Limited Liability Company Act or other law to the Secretary of State have been paid;

the Company's most recent biennial report required by section 21-125 has been filed by the Secretary of State;

the Secretary of State has not administratively dissolved the company;

the Company has not delivered to the Secretary of State for filing a Statement of Dissolution;

a Statement of Termination has not been filed by the Secretary of State.

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on this date of

May 18, 2022

Secretary of State