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r	To: Division of Corporations Fax Number : (850)617-6383	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	From:	2022 J
	Account Name : CAPITOL SERVICES, Account Number : 120160000017 Phone : (855)498-5500 Fox Number : (800)402 7622	<u>3</u>
	<pre>**Enter the email address for this business en annual report mailings. Enter only one en</pre>	ntity to be used for future mail address please.**
	Email Address:	÷
•=	Foreign Limited Liability	Company
	KGM HOLDINGS, I	LLC

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Certificate of Status	1
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H22000298443

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 RECEISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 KGM Holdings, LLC

innind liability company is organized) instrumented business in Florids, if prior to re solicits 605.0904 & 605.0905, F.S. to dotormin	3. gistration e penalty	(FEI sumber, if applicable)	7287
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	6.	5455 Wilshire Blvd., Suite 800	
<u> </u>	0.	(Mailing Address)	. c
		Los Angeles, CA 90036	
		-	
ida registered agent: (P.O. Box	<u>NOT</u>	acceptable)	
Corporate Services, Inc.			
st Park Avenue 2nd Fl		(
	Corporate Services, Inc.	Corporate Services, Inc.	Los Angeles, CA 90036 ida registered agent: (P.O. Box <u>NOT</u> acceptable) Corporate Services, Inc.

32301 Tallahassee Florida (City)

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.

Lo Saechao, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

(Zip code)

(Registered agent's signature)

•

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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;	<u>Title or Capacity:</u>	Name and Address:
Manager	Name: Gabriella Goldner	🔀 Manager	Name: Solomon Goldner
Member	Address: 5455 Wilshire Blvd., Suite 800	Member	Address: 5455 Wilshire Blvd., Suite 800
Authorized	Los Angeles, CA 90036	Authorized	Los Angeles, CA 90036
Person		Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized	<u> </u>	Authorized	
Person		Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	Address:	Mcmber	Address:
Authorized	<u> </u>	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.

Solomon Goldner Typed or printed name of signee

H22000298443

Signature of an authorized person

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

KGM Holdings LLC

is a

Limited Liability Company

formed or registered on 01/04/2006 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20061006519.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/24/2022 that have been posted, and by documents delivered to this office electronically through 08/30/2022 @ 16:47:25.

I have affixed hereto the Great Scal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 08/30/2022 @ 16:47:25 in accordance with applicable law. This certificate is assigned Confirmation Number 14279340



nsubl

Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/bit/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. <u>Confirming the issuance of a certificate is mereby</u> optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http:// www.sos.state.co.us/click "Builnesses, trademarks, trade names" and select "Frequently Asked Questions."

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