N22000013885

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
| |
| |
| |

Office Use Only



300391230693



S. ROBERTS SEP - 7 2022



September 02, 2022

115 N CALHOUN ST., STE, 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

| Date: | , | _ | | | | |
|-----------------------|---------------|-----------------------------|----------------------|--|--|--|
| Name: David S | hulman | _ | | | | |
| Reference #: | 1772032 | | | | | |
| Entity Name: | | | | | | |
| ✓ Articles of Incorpo | oration/Autho | rization to Transact Busine | SS | | | |
| Amendment | | | | | | |
| Change of Agent | | | | | | |
| Reinstatement | | | ISSUES? CALL David: | | | |
| ☐ Conversion | | | 850-270-0082 | | | |
| ☐ Merger | | | | | | |
| ☐ Dissolution/Withd | rawal | | | | | |
| ☐ Fictitious Name | | | | | | |
| Other | | | | | | |
| | | | | | | |
| | | | | | | |
| Authorized Amount: | \$12 | 5.00 | | | | |
| Signature: | David Shulmo | an | | | | |

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:

| _ | e adopted for the purpose of transacting business in F | | THE THE THE THE TABLE | Linuxu Zinoniy v | | G, (ii to |
|--------------------------------------|--|-----------------------|-----------------------|-------------------|-------------|-------------------|
| | elaware | 3 | | | | |
| diction under the law of which | h foreign limited liability company is organized) | | | (FEI number, if a | ipplicable) | |
| | dha Gaaran an 11 | | | | - <u>-</u> | |
| | (Date first transacted business in Florida, if prior t (See sections 605,0904 & 605,0905, F.S. to deter | mine penalty liabilit | ıy) | | | |
| 1440 Bridgegate Drive | | 6 | 1440 Bridgegate Drive | | | |
| (Street Address of Principal Office) | | U | (| Mailing Address) | | |
| Diamond Bar, CA 91765 | | | Diamo | nd Bar, CA | 91765 | 20 |
| | | | | · | 3 | 72 SI |
| | | | | | • | - [- - |
| 1 | | Non | | | | <u>.</u> |
| r and <u>street address</u> t | of Florida registered agent: (P.O. Bo | x <u>NOT</u> accer | ptable) | | - | AH 10: 3 |
| | 00051101101 | | | | • | 0 |
| Name: | COGENCY GLOBAL | INC. | | | , - | |
| Office Address: _ | 115 North Calhoun St. S | Suite 4 | _ | | | |
| | | | , Florida | 32301 | | |
| | 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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Andrew D. Peykoff, II Kent Ratzlaff **⊠**Manager Name: ✓ Manager Name: Address: ____1440 Bridgegate Drive Address: __1440 Bridgegate Drive ☐ Member Member Diamond Bar, CA 91765 Diamond Bar, CA 91765 Authorized [] Authorized Person Person Other Other l |Other Other Name: ____David McCullagh Brian Hess **⊠**Manager Name: |X Manager Address: _ 1440 Bridgegate Drive Address: 1440 Bridgegate Drive Member Diamond Bar, CA 91765 Diamond Bar, CA 91765 Authorized Authorized Person Person Other Other Other___ Other Manager Name: _____ Name: _____ ∐Member Address: _____ Member Address: Authorized Authorized Person Person __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

lanelle Grander

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BANANA GEORGE, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE FIRST DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BANANA GEORGE, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



Jeffrey W. Buffect, Secretary of State

Authentication: 204299402