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S. FRANKLIN SFP 1 5 2022

COVER LETTER

Integrated Direct Marketing LLC BJECT:		
	ime of Limited Liability Company	
	ty Company for Authorization to Transact Business in Florida, be referenced foreign limited liability company to transact busing	
ase return all correspondence concerning this matte	r to the following:	
Jacque Hoke		
	Name of Person	
Integrated Direct Marketing LLC		
	Firm/Company	
4109 MacGillivray Dr		
	Address	
Manhattan, KS 66503	Address	
	City/State and Zip Code	
jhoke@idm.us.com		
E-mail address: (to	be used for future annual report notification) call:	
further information concerning this matter, please	call:	
Jacque Hoke	703 547-4967	
Name of Contact Person	Area Code Daytime Telephone Number	
Mailing Address: Registration Section	Street Address: Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC." or "LLC.") Four imave inaverable, orient alternate name adopted for the purpuse of ministed ting business in Florids. The alternate name must include Liability Company," "LLC." or "LLC." DE 32-0060500 3. (FEI number, If apolicable) (Date first transacted business in Florids, of power in registration.) (See sections 905 0004 & 605,000X, F.S. to determine penalty liability) 11654 Plaza America Dr #858 11654 Plaza America Dr #858 Reston, VA 20190 Reston, VA 20190 Reston, VA 20190 Reston, VA 20190 NAME: 1200 South Pine Island Road Plantation Plantation Florida (Cay) Florida (Cay) 133324 (Cay)				
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		1200 South Pine Island Road Plantation		. 10
	Office Address: egistered agent's accep	Plantation (Cuy)	, Florida (Asp. code)	
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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:	Title or Capacity:	Name and Address:
□Manager	Name: Chad Slater	□Manager	Name: James Cava
■Member	Address: 5906 Calla Drive	■Member	Address:
□Authorized	McLean, VA 22101	□Authorized	Bridgeport, WV 26330
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Name: F3 Address: G
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□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. 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.

Chad Slater

Eyped or printed name of signee



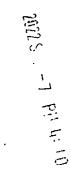
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "INTEGRATED DIRECT MARKETING, 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.





Authentication: 204301634

Date: 09-01-22

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