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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone : (855)330-1010 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Kidology Tutoring LLC

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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Date that transacted business in Florida, if prior to registration.) (See sections (old) 9904 & 403 0905, F.S. to determine penalty liability) 515 E Las Olas Blvd Ste 120 (Mailing Address) Fort Lauderdale FL 33301 Rame: Registered Agents Inc. Office Address: Registered Agents Inc. St. Petersburg St. Petersburg (Cas) St. Petersburg (Cas) (Cas) (Cas) Registered agent and to accept service of process for the above stated limited liability company at the signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familial accept the obligations of my position as registered agent.	ine unavailable, enter alternate:	name adopted for the purpose of transacting business in Flo		may company, c.e.c. or	
(Date first transacted business in Florida, if prior to registration.) (See sections 693,0904 & 693 0905, F.S. to determine penalty liability) 515 E Las Olas Blvd Ste 120 of Address of Principal Office) Fort Lauderdale FL 33301 Fort Lauderdale FL 33301 Fort Lauderdale FL 33301 Name: Registered Agents Inc. Office Address: 7901 4th St N STE 300 St. Petersburg St. Petersburg Florida 33702 St. Petersburg Florida 33702 Glap code) St. Petersburg Glap code of Process for the above stated limited liability company at the input and the application. I hereby accept the appointment as registered agent and agree to act in this capacity. I furnomply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familia			_{3.} <u>920404970</u>		
515 E Las Olas Blvd Ste 120 1 Address of Principal Office) Fort Lauderdale FL 33301 Same: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg St. Petersburg Florida 33702 Cap ender Florida 43702 Cap ender Florida 53702 Florida 5470 Florida 5470 Florida 6470 Fl	(Jurisdiction under the law of w	hielt foreign limited liability company is organized)	ifel namber,	il applicable)	
515 E Las Olas Blvd Ste 120 6. 515 E Las Olas Blvd Ste 120 Fort Lauderdale FL 33301 Step to Lauderdale FL 33301 Fort Lauderdale FL 33301					
Port Lauderdale FL 33301 Fort Lauderdale FL 33301 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. Office Address: 7901 4th St N STE 300 St. Petersburg (Cay)	· · · · · · · · · · · · · · · · · · ·	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	rgistration.) e penalty liability)		
Fort Lauderdale FL 33301 Fort Lauderdale FL 33301 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. Office Address: 7901 4th St N STE 300 St. Petersburg (Cas) Florida 33702 (Cap code) St. Petersburg (Cas) Florida 43702 (Cap code) St. Petersburg (Cas) Florida 43702 (Cap code) St. Petersburg (Cas) Florida 43702 (Cap code) Florida 53702 (Cap code) Florida 647 Florida 657 Florida 657 Florida 677 Florida 73702 Flo	515 E Las Ola	s Blvd Ste 120	515 E Las Olas Blv	d Ste 120	
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Office Address: The standard of the standar	Nama and street address	es of Florida registered agent: (P.O. Rox	NOT acceptable)		
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gistered agent's acceptance: wing been named as registered agent and to accept service of process for the above stated limited liability company at the signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familia				2022 \$	
gistered agent's acceptance: wing been named as registered agent and to accept service of process for the above stated limited liability company at the signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familia	Name:	Registered Agents Inc.		2022 SEP 26	
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	Name:	Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg	. Florida <u>33702</u>	2022 SEP 26 AHII	
	Name: Office Address: sistered agent's accepting been named as regarded in this application on the provise omply with the provise	Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (Cay) plance: egistered agent and to accept service of pation, I hereby accept the appointment assions of all statutes relative to the proper	. Florida 33702 (Zip code) rocess for the above stated limited lies registered agent and agree to act in	ability company at to this capacity. I fur	

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]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: Nicole Anyadike Name: □Manager □Manager □Member Address: **X**Member Address: 515 E Las Olas Blvd Ste 120 □ Authorized □ Authorized Fort Lauderdale FL 33301 Person Person Other____ □Other____ □Other____ □Other___ Name: Name: □ Manager □Manager □Member Address: Address: □Member Authorized ☐ Authorized Person Person □Other_____ □Other_____ □Other_____ □Other___ Name: _____ □ Manager □ Manager Name: □Member Address: Address: _____ □Member 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 \$.817.155, F.S. Riley Park

Typed or printed name of signee

STATE OF WYOMING Office of the Secretary of State

I, KAREN L. WHEELER, Deputy Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

Kidology Tutoring LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **September 19, 2022**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2022-001161677**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 20th day of September, 2022 at 10:40 AM. This certificate is assigned ID Number 055233322.



Deputy Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.