

W22000015495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

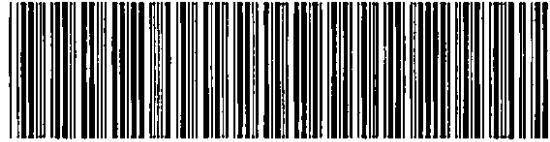
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. FRANKLIN
OCT 08 2022

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:

1. BRAYN CONSULTING LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

California

2. (Jurisdiction under the law of which foreign limited liability company is organized)

3. (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 10620 Southern Highlands Parkway
(Street Address of Principal Office)

6. 10620 Southern Highlands Parkway
(Mailing Address)

Suite 110-473

Suite 110-473

Las Vegas, NV 89141

Las Vegas, NV 89141

7. 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, Florida 33702
(City) (Zip code)

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.

Bill Hume

(Registered agent's signature)

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:

☐ Manager Name: Brady Bryan
☒ Member Address: 2690 Catania Street
☐ Authorized Henderson, NV 89044
Person
☐ Other ☐ Other

☐ Manager Name: Stephanie Bryan
☒ Member Address: 2690 Catania Street
☐ Authorized Henderson, NV 89044
Person
☐ Other ☐ Other

☐ Manager Name: Yong Jeon
☒ Member Address: 3215 Monterey Boulevard
☐ Authorized Oakland, CA 94602
Person
☐ Other ☐ Other

Title or Capacity:

Name and Address:

☐ Manager Name: Justin DiLauro
☒ Member Address: 6242 Paisley Street
☐ Authorized Houston, TX 77096
Person
☐ Other ☐ Other

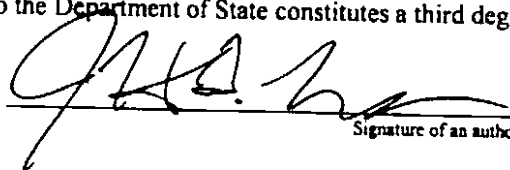
☐ Manager Name: Kevin Sullivan
☒ Member Address: 1102 Adele Street
☐ Authorized Houston, TX 77009
Person
☐ Other ☐ Other

☐ Manager Name: Geoffrey Garber
☒ Member Address: 2011 Riverine Crest Circle
☐ Authorized Katy, TX 77494
Person
☐ 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.



Signature of an authorized person

Justin DiLauro

Typed or printed name of authorized person



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: BRAYN CONSULTING LLC
Entity No.: 201013910271
Registration Date: 04/05/2010
Entity Type: Limited Liability Company - CA
Formed In: CALIFORNIA
Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 20, 2022.

SHIRLEY N. WEBER, PH.D.
Secretary of State

Certificate No.: 031128826

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.