## MB0000/64/1

(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



000396231600

₹.

2022 OCT 25 PM 2: 13

· 11 05402

, 1Lt. Ü

ALLAHASSEE, FINE

RECEIVED

T. LEMIEUX

OCT 26 2021

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO.	:	120000001	95		
REFERENCE	:	075689	8353858		
AUTHORIZATION	:	Level Del	*		
COST LIMIT	:	\$ (125.00	man		
ORDER DATE : October 25, 2022					
ORDER TIME : 1:51 PM					
ORDER NO. : 075689-040					
CUSTOMER NO: 8353858					
			<b>-</b>		
FOREIGN FILINGS					
NAME: FITTLE LLC					
XXXX QUALIFICATION (TYPE: <u>LL</u> )					
PLEASE RETURN THE FOLLOWING AS	PRO	OOF OF FILI	NG :		
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STA	MDI	ING			

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

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

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTEN, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN TAMITED LIABILITY COMPANY TO TRANSACT BY INVESS IN THE STATE OF FLORIDA:

(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company, "L.L.C.," or "LLC.")			
ume unavailable, enter alternate r	name adopted for the purpose of transacting business in Fl	ords. The alternate name must include "Limited Liability Company,"	"L L C," or "LLC		
Delaware		88-3143959			
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)			
09/01/2022					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	egistration )			
201 Merritt 7, Norwa		201 Merritt 7, Norwalk, CT 06851			
et Address of Principal Office)		6. (Mailing Address)			
	<del></del>				
<del>-</del>					
Name and street address	es of Florida registered agent: (P.O. Box	NOT acceptable)			
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	2(		
Name and street addres			2022		
Name and street address  Name:	ss of Florida registered agent: (P.O. Box Corporation Service Company		2022 00		
	Corporation Service Company		2022 CCT 2		
Name:			2022 OCT 25		
	Corporation Service Company		25		
Name:	Corporation Service Company	32301	N -		
Name:	Corporation Service Company  1201 Hays Street  Tallahassee		25		
Name:	Corporation Service Company 1201 Hays Street	32301, Florida	25		
Name: Office Address:	Corporation Service Company  1201 Hays Street  Tallahassee  (Cay)	32301 (Zap code)	25 PM 2: 13		
Name: Office Address: gistered agent's acceptions been named as re	Corporation Service Company  1201 Hays Street  Tallahassee  (Cay)  stance: rgistered agent and to accept service of p	, Florida (Zap code)	25 PM 2: 13 pany at the p		
Name: Office Address: gistered agent's accepting been named as reignated in this applica	Corporation Service Company  1201 Hays Street  Tallahassee  (Cay)  stance: rgistered agent and to accept service of partion, I hereby accept the appointment as	32301  Florida (Zap code)  Frocess for the above stated limited liability composered agent and agree to act in this capacity.	25 PM 2: 13 pany at the p ity. I further		
Name: Office Address: gistered agent's accepving been named as reignated in this applicationship with the provisi	Corporation Service Company  1201 Hays Street  Tallahassee  (Cay)  stance: rgistered agent and to accept service of partion, I hereby accept the appointment as	, Florida (Zap code)	25 PM 2: 13 pany at the p ity. I further		

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

Fitle or Capacity:	Name and Address:	Title or Capacity:	Name and Address
■Manager	Name: Nicole Torraco	■Manager	Name:
□Member	Address: 201 Merritt 7	□Member	Address: 201 Merritt 7
□Authorized	Norwalk, CT 06851	□Authorized	Norwalk, CT 06851
Person ·		Person	
President Other	Other	Treasurer	□Other
<b>■</b> Manager	Name:	□Manager	Name:
□Member	Address: 201 Merritt 7	□Member	Address:
□Authorized	Norwalk, CT 06851	□Authorized	
Person		Person	
Secretary Secretary	Gen. Counsel	□Other	□Other
⊐Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	□Other	□Other	□()ther

- 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.

John n	Taiti-	
- 0	Signature of an authorized person	_
John Martin	•	
	Typed or printed rame of signee	

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FITTLE 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 TWENTY-FIFTH DAY OF OCTOBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FITTLE LLC" WAS FORMED ON THE NINTH DAY OF JUNE, A.D. 2022.

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

at corp.delaware.gov/auth

Authentication: 204697658

Date: 10-25-22