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S. FRANKLIN

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COVER LETTER

TO:

Division of Corporations	P
UBJECT: / Nanos /	Research LLC
	of Limited Liability Company
he enclosed "Application by Foreign Limited Liability Cxistence, and check are submitted to register the above re	Company for Authorization to Transact Business in Florida," Certif eferenced foreign limited liability company to transact business in
ease return all correspondence concerning this matter to	the following:
limothy	Name of Person
-	Name of Person
	Firm/Company
4450 Alton	Roud Mami Beach, FL 33/40
	Address
Miam,	· Buch FL 33140
Cit	ty/State and Zip Code
Tim(a) s	ty/State and Zip Code Tock Naviga tors Com used for future annual report notification)
E-mail address: (to be	used for future@nnual report notification)
or further information concerning this matter, please call	1
(` /	
Grant longmire	at (408) 759-1957
Name of Contact Person	at (408) 759-1957 Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	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
Enclosed is a check for the following amount:	
Please make check payable to: FLORIDA DEPA	
	& 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certific

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

Composition of the second of t	LLC." or "LLC.")
(Same of Poreign Limited Liability Company; must include "Lim	nted Liability Company," "L.L.C.," or "L.L.C.")
available, enter alternate name adopted for the purpose of transacting business in	n Florida. The alternate name must include "Limited Liability Company," "L.L.C," or
DF	
ction under the law of which foreign limited hability company is organized)	3. 99-0799572
, , , , ,	, · · · · · · · · · · · · ·
(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to dete	to registration.) rmine penalty hability)
1450 Alton Road ess of Principal Office)	6. 4450 Alton Road
Diami Beach FL 33140	6. 4450 Alton Road = Minmi Beach FL 33140
	· · · · · · · · · · · · · · · · · · ·
	
	L.
and street address of Florida registered agent: (P.O. Bo	ox NOT acceptable)
	·
	·
Name: Timothy Luong Office Address: 4450 Alton Rou	ad
and street address of Florida registered agent: (P.O. Bo Name: 1 imothy luong 4450 Alten Rou Minmi Beach	ad
Name: Timothy Luong Office Address: 4450 Alton Rou	·
Name: Timothy Lvong Under Stack Minmi Beach (City) ed agent's acceptance:	. Florida <u>33/40</u> (Zip code)
Name: Imothy loong 4450 Alton Rou Minmi Beach (City) ed agent's acceptance: een named as registered agent and to accept service of a in this application, I hereby accept the appointment	Florida 37/40 (Zip code) f process for the above stated limited liability company at the as registered agent and agree to act in this capacity. I fur
Name: Imothy loong 4450 Alton Rou Minmi Beach (City) ed agent's acceptance: een named as registered agent and to accept service of a in this application, I hereby accept the appointment	Florida 33/40 (Zip code) f process for the above stated limited liability company at the

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: Timothy Louna	□Manager	Name:
□Member	Address: 4450 Alten Road	□Member	Address:
□Authorized	Minmi Beach, Fl 33140	□Authorized	
Person		Person	
XOther_CEO	Other	□Other	Other
□Manager	Name:	□Manager	Name:
⊒Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	277
□Other	Other	□Other	□Other
			-n :
]Manager	Name:	□Manager	Name: Name:
∃Member	Address:	□Member	Address:
Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

- 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.

Signaptre of an authorized preson

Timothy wong

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "THANOS RESEARCH, 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 SEVENTH DAY OF SEPTEMBER, A.D. 2022.



Authentication: 204339240

Date: 09-07-22