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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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APPROVED AND FILED

2022 DEC 21 AM 9:40

NOV 28 2022

K. Brumbley

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: [illegible] LLC
Name of Limited Liability Company

Enclosed: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of [illegible] and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please send all correspondence concerning this matter to the following:

MARIA SMITH
Name of Person

RARITY HAIR COLLECTION LLC
Firm Company

2933 MAIDEN GRASS ISLE
Address

WESLEY CHAPEL, FL 33543
City State and Zip Code

HELLO@RARITYHAIRCOLLECTION.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA SMITH at (813) 816-5505
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:
Please make check payable to: FLORIDA DEPARTMENT OF STATE

☐ $125.00 Filing Fee ☑ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy

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

PURSUANT TO 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. RABITY HAIR COLLECTION LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LLC.")

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

3. OHIO
(Jurisdiction under the laws of which the foreign limited liability company is organized)

4. 85-1490467
(FEI number, if applicable)

5. [redacted] JAN 1, 2023
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0902 & 605.0905, F.S. to determine penalty liability.)

6. 23542 STATE RD. 54
SUITE #112
LUTZ, FL 33572
(Principal Office)

7. 23542 STATE RD. 54
SUITE #112
LUTZ, FL 33572
(Mailing Address)

Name and street address of Florida registered agent (P.O. Box NOT acceptable)

Name: MARIA SMITH

Office Address: 23542 STATE RD. 54 SUITE 112

LUTZ, Florida 33572
(City) (ZIP code)

2022 NOV 28 PM 2:00
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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.

Maria Smith
(Registered agent's signature)

... for reporting purposes: list names, title or capacity and addresses of the primary members, managers or persons authorized to ... up to six (6) total]

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
☑ ...	Name MARIA SMITH	☐Manager	Name _____
☐ ...	Address 2933 ...	☐Member	Address _____
☐ ...	MAIDEN GRASS ISLE	☐Authorized	_____
☐ ...	WESLEY CHAPEL, FL 33543	Person	_____
☐ ...	☐Other _____	☐Other _____	☐Other _____
☐ Manager	Name _____	☐Manager	Name _____
☐ Member	Address _____	☐Member	Address _____
☐ Authorized	_____	☐Authorized	_____
☐ Person	_____	Person	_____
☐ _____	☐Other _____	☐Other _____	☐Other _____
☐ Manager	Name _____	☐Manager	Name _____
☐ Member	Address _____	☐Member	Address _____
☐ Authorized	_____	☐Authorized	_____
☐ Person	_____	Person	_____
☐ _____	☐Other _____	☐Other _____	☐Other _____

... Note: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-... individuals may be added to the index when filing your Florida Department of State Annual Report form.

... best is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the ... or under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath ... translator must be submitted.)

... document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information ... in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Maria Smith

Signature of Applicant

MARIA SMITH

Typed or Printed Name of Applicant

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show RARITY HAIR COLLECTION LLC, an Ohio Limited Liability Company, Registration Number 3963081, was organized in the State of Ohio on November 27, 2016, is currently in FULL FORCE AND EFFECT upon the records of this office.

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 25th day of November, A.D. 2022.

Ohio Secretary of State

Validation Number: **202232900566**