

12/20/22, 10:57 AM

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : INCCORP SERVICES INC
Account Number : 120120000007
Phone : (702)866-2500
Fax Number : (702)900-2290

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

Email Address: managedreports@incorp.com

**Foreign Limited Liability Company
HYREDRIVE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

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To: Registration Section
Division of Corporations

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SUBJECT: HYBDRIVE, LLC

Name of contributor: _____
Name of contributor: _____

The enclosed "Application to Register and Link my Company for Anti-rustion to Improve Barbed Wire in Florida," Certificate of Existence, and deed are submitted to you for the above reasons. I request your assistance in making my application to register and link my company for anti-rustion to improve barbed wire in Florida.

These results do not, however, mean that the model is the best one.

Georgia Dorsam

2. *Assessment of the impact of the proposed project on the environment*

InCo Services, Inc.

1994-1999: 22

3773 Howard Hughes Pkwy, Suite 5006

2. 2. 2. 2. 2.

Las Vegas, NV 89169-6014

.....

managedreports@incorp.com

2. *Methods* The authors used a cross-sectional design to examine the prevalence of self-reported depression and anxiety among a sample of 1,000 U.S. adults. Data were collected from a national survey of U.S. adults in 2010. The survey included questions about the prevalence of self-reported depression and anxiety, as well as demographic information such as age, gender, and education level. The authors used logistic regression to examine the relationship between self-reported depression and anxiety and demographic factors.

For further information, go to www.elsevier.com/locate/jbi

Georgia Dorsam on behalf of InCorp Services, Inc. 800-246-2677

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Executive Committee Members:

Allegory and Symbolism:

Registration Number
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

444:25, 26:1-28:1

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32304

Tested on 10, 15, & 20 for the following system

First, make check payable to FLORIDA DEPARTMENT OF STATE.

☐ \$125.00 Filing Fee ☐ \$100.00 Filing Fee & Certificate of Deposit ☐ \$350.00 Filing Fee & Certified Copy ☐ \$100.00 Filing Fee, Certificate of Deposit & Certified Copy

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN COMPLIANCE WITH SECTION 809.01, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED FOR REGISTRATION: LIMITED LIABILITY
COMPANY (LIMITED LIABILITY COMPANY) IN THE STATE OF FLORIDA

1. HYREDRIVE, LLC

2. Delaware

3. 11/22/2021

4. 9/15/2022

5. 3350 SW 148th Ave

6. 3350 SW 148th Ave

Suite 202

Suite 202

Miramar, FL 33027

Miramar, FL 33027

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

Name inCorp Services, Inc

Office Address 17888 67th Court North

Loxahatchee

33470

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company in 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.

Isabel Bungea on behalf of InCorp Services, Inc

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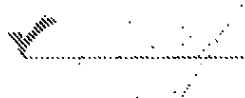
5. For initial indexing purposes, list names, title or capacity and addresses of the primary members (manager) or persons authorized to manage (up to six (6) total).

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☐ Manager	Name: <u>AmeriDrive Holdings, Inc.</u>	☐ Manager	Name: <u>HyreCar, Inc.</u>
☒ Member	Address: <u>3350 SW 148th Ave</u>	☒ Member	Address: <u>915 Wilshire Ave</u>
☐ Authorized	<u>Suite 202</u>	☐ Authorized	<u>Suite 1950</u>
Person	<u>Miramar, FL 33027</u>	Person	<u>Los Angeles, CA 90071</u>
☐ Other	<u></u>	☐ Other	<u></u>
☐ Manager	Name: <u>Carlos Hernandez</u>	☐ Manager	Name: <u></u>
☒ Member	Address: <u>915 Wilshire Ave</u>	☐ Member	Address: <u></u>
☐ Authorized	<u>Suite 1950</u>	☐ Authorized	<u></u>
Person	<u>Los Angeles, CA 90071</u>	Person	<u></u>
☐ Other	<u></u>	☐ Other	<u></u>
☐ Manager	Name: <u></u>	☐ Manager	Name: <u></u>
☐ Member	Address: <u></u>	☐ Member	Address: <u></u>
☐ Authorized	<u></u>	☐ Authorized	<u></u>
Person	<u></u>	Person	<u></u>
☐ Other	<u></u>	☐ Other	<u></u>

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

6. 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 examined in accordance with section 605.02(2)(f), 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. 217.15, F.S.



 Carlos Hernandez
 President, AmeriDrive Holdings, Inc.

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Delaware

The First State

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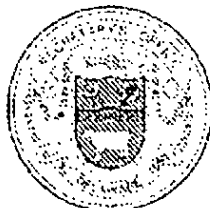
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "HYREDRIVE, LLC" IS DULY FORMED UNDER
THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE FOURTEENTH DAY OF OCTOBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HYREDRIVE, LLC"
WAS FORMED ON THE TWENTY-SECOND DAY OF NOVEMBER, A.D. 2021.

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

2022 OCT 14 3:15 PM




Jeffrey W. Bullock, Secretary of State

6417373 8300

SR# 20223774370

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204625921

Date: 10-14-22

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