## M23000000178

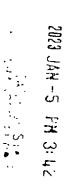
(Requestor's Nam	e)
(Address)	
(Address)	
(City/State/Zip/Ph	one #)
PICK-UP WAIT	MAIL
(Business Entity N	łame)
(Document Numb	er)
Certified Copies Certifica	tes of Status
Special Instructions to Filing Officer:	13
	<u> </u>

Office Use Only



700397275687

11,414,229--01331--091 \*\*130.00



JAN 0: 2023 M. SOLOMON

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Bolar	Name of Limited Liability Company	
The enclosed "Application by Foreign Existence, and check are submitted to	Limited Liability Company for Authorization to Transact Business in Florida," register the above referenced foreign limited liability company to transact busin	Certificate of less in Florida
Please return all correspondence conc	erning this matter to the following:	
	Poleman Name of Person	
Bolard,	LLC Firm/Company	
_1121 Dal	las Drive, Ste I	2023 JAN
Denton, 7	Name of Person  LLC  Firm/Company  As Drive, Ste I  Address  X 76205-5100  City/State and Zip Code  Tan Q gmail. com  mail address (to be used for future annual report notification)  to matter places call:	-5 Pri 3: 42
<u> Kwcolen</u>	nan @ gmail.com mail address (to be used for future annual report notification)	1 12
For further information concerning th	is matter, please call:	
Any Burges	at (214) 770 - 1419 ntact Person Area Code Daytime Telephoné Number	
Mailing Address: Registration Section Division of Corporation 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	
	or FLORIDA DEPARTMENT OF STATE  2 \$130.00 Filing Fee &  \$155.00 Filing Fee &  \$160.00 Filing Fee, or Certificate of Status	

APPLICATION BY FOREIG	LIMITED BABILLLY COMPANY FOR AITHORIZATION TO TRANSACT BUSINESS IN FLORIDA
IN COMPULANTI UTILLAN JEEN AC COMPANYTOTRANNU, TULNINN	(POETTERMON STATEMENT TOTALOUTING IS SEIBMITTED TO RETASTER A FOREFRY TIMBED LEABILITY STEELSTATEON TORION
1. Dolard, LLC	ability Company; must include Hamiled Eashlift Compony; T.E.C., or T.E.C.)
Of name intermitable, every alternate name aliqui	d for the prepare of a moneting basiness in Florids. The shirmsterisme must one hade. I imited Leb-lity 1. impairs. 13.1.6.7.4. [3.17]
2. Texas charmed the same of which for the	limited liability company is (i.g. unized)  3. 32077503236  (ii.l. tumber, il. applicable)
-4 (there	furst transacted haveness m ) lends of open to regretation
1121 Dalla 5 Dr.	Suite 1 6. 1121 Dallas Dr. Suite 1  Suite 1 100 Mails and Company of the Company
Denton, TX 76	205-5100 Danton, TX 76205-5100
7. Name and street address of Flor	ida registered agent: (P.O. Box NOT acceptable)
Name:	shired Retroits US, LLC
Office Address: 79	ON county they 393 Suite 3B
_5	and hosa Beach, Florida 37459
designated in this application, I he	pgent and to accept service of process for the above stated limited liability company at the place reby accept the appointment as registered agent and agree to act in this capacity. I further agree is statutes relative to the proper and complete performance of my duties, and I am familiar with psition as registered agent.

(Registered agent v 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: Title or Capacity: Name and Address: Name and Address: Name: Todd Steward Name: LES/it Coleman □Manager □ Manager Address: 1/21 Dallas Dr. Str. I Address: 1/21 Dallas Dr. Ste 1 Denton, TX 76205-5100 ✓Authorized Denton, TX 76205-5/00 Authorized Person Person □Other □Other □Other \_\_\_\_\_ Name: Bill Coleman □Manager □Manager Address: 1/21 Dallas Dr. Ste I Address: 1/2/ Dallas Dr., Ste 7 ⊠Member ⊠Member ✓Authorized Denton, TX 76205-5100 Denton, TX 76205 - 5100 M∆uthorized Person Person □Other □Other □Other □Other Name: Ton: Steward □Manager □Manager Address: 1121 Dallas Dr. Ste I Member . ™ember MAuthorized Denten, TX 76205-5100 Denton, TX 76205 - 5100 ⊠Authorized Person Person □Other □Other □Other □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

Leslie Coleman

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



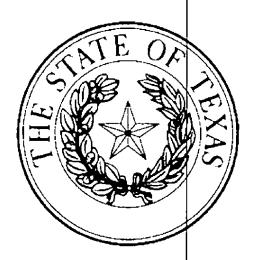
## Office of the Secretary of State

## Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Bolard, LLC (file number 803906137), a Domestic Limited Liability Company (LLC), was filed in this office on January 21, 2021.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 15, 2022.



Phone: (512) 463-5555

Jose A. Esparza Deputy Secretary of State

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services



December 7, 2022

BOLARD, LLC 1121 DALLAS DRIVE, STE 1 DENTON, TX 76205 5100

SUBJECT: BOLARD, LLC Ref. Number: W22000150447

We have received your document for BOLARD, LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Letter Number: 322A00027146

RECEIVED
JAN 0 5 2023