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(Req	uestor's Name)	
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(City)	/State/Zip/Phon	e #)
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Popstroke Holdings, LI	_C			
Please Debit I20000000	257 For: 16	0		
Thank you Seth Neeley				
Str.				Art of Inc. File LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
			-	Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
,				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
Signature				Vehicle Search
		— — — — –		Driving Record
Requested by: SETH	02/24/23			UCC 1 or 3 File
				UCC 1 Search
Name I	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

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TO:

ro:	Registration Section Division of Corporations			
eiid ie	Popstroke Holdings LLC			
SUBJECT: Name of Limited Liability Company				
The end Existen	closed "Application by Foreign Limited Liability Cor ace, and check are submitted to register the above refe	npany for Authorization to Transact Business in Florida," Certificate of erenced foreign limited liability company to transact business in Florida.		
Please 1	return all correspondence concerning this matter to the	ne following:		
	Mark Rouleau			
		Name of Person		
	Popstroke Holdings LLC			
	-	Firm/Company		
	1001 N. U.S. Highway 1, Suite 500	<u> </u>		
		Address		
	Jupiter, FL 33477			
	City	/State and Zip Code		
	mark.rouleau@popstroke.com			
	E-mail address: (to be u	sed for future annual report notification)		
For fur	rther information concerning this matter, please call:			
	Mark Rouleau	561 203-7974 at ()		
	Name of Contact Person	at ()		
	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 DEPA \$125.00 Filing Fee \$130.00 Filing Fee Certificate of	& S155.00 Filing Fee & S160.00 Filing Fee, Certificate		

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Delaware		orida. The alternate name must include "Limited	,,,
		83-1613033 3.	
(Jurisdiction under the law of v	which foreign limited liability company is organized)	(FEI nu	imber, if applicable)
1/4/2023			
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) ne penalty liability)	
1001 N. U.S. Highway	71, Suite 500	1001 N. U.S. Highway 1,	Suite 500
et Address of Principal Office)		6. (Mailing Address)	
Jupiter, FL 33477		Jupiter, FL 33477	
vame and <u>street addre</u>	ss of Florida registered agent: (P.O. Box Greg Bartoli,	<u>INO 1</u> acceptable)	EB 28 F
Name:		_	
Name: Office Address:	1001 N. U.S. Highway 1, Suite 500		ን <mark>ዘ 2: 49</mark>
	1001 N. U.S. Highway 1, Suite 500 Jupiter		

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:	
■Manager	Name: Greg Bartoli	□Manager	Name: Mark Rouleau
□Member	Address:	□Member	Address: 1001 N. U.S. Highway 1
□Authorized	Suite 500	■ Authorized	Suite 500
Person	Jupiter, FL 33477	Person	Jupiter, FL 33477
□Other	Other	Other	
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	□ Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	□Other	Other	Other

- 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.

Me Raul	<u>:</u>	
	Signature of an authorized person	
Mark Rouleau		
	Typed or printed name of signee	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "POPSTROKE HOLDINGS 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-FOURTH DAY OF FEBRUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POPSTROKE HOLDINGS LLC" WAS FORMED ON THE FOURTH DAY OF JANUARY, A.D. 2023.

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

Authentication: 202782823

Date: 02-24-23

7216933 8300 SR# 20230686123