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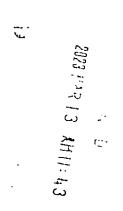
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## **COVER LETTER**

	of Limited Liability Company
pplication by Foreign Limited Liability Concek are submitted to register the above re	ompany for Authorization to Transact Business in Florida," Certifica eferenced foreign limited liability company to transact business in Flo
correspondence concerning this matter to	the following:
Austin Eckman	
	Name of Person
Inventrkits, PBLLC	
	Firm/Company
12620 20th Street East	
	Address
Parrish, FL 34219	
Cit admin@inventr.io	ty/State and Zip Code
E-mail address: (to be	used for future annual report notification)
mation concerning this matter, please call:	:
Goldstein	508 737-2931
Name of Contact Person	at () Area Code Daytime Telephone Number
e Address: ration Section on of Corporations Box 6327 hassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Inventrkits, PBLLC  12620 20th Street East  Parrish, FL 34219  Cit admin@inventr.io  E-mail address: (to be mation concerning this matter, please call: Goldstein  Name of Contact Person  2 Address: ration Section on of Corporations Box 6327



January 30, 2023

AUSTIN ECKMAN 12620 20 ST E PARRISH, FL 34219

SUBJECT: INVENTRKITS, PBLLC Ref. Number: W23000012212

We have received your document for INVENTRKITS. PBLLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 623A00002238

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

## 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: Inventrkits, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 83-3522234 Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 2/11/2019 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 12620 20th Street East 12620 20th Street East 5, (Street Address of Principal Office) (Mailing Address) Parrish, FL 34219 Parrish, FL 34219 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Austin Eckman Name: 12620 20th Street East Office Address: 34219 Parrish 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. -- DocuSigned by: 704A586A04054FB . (Registered agent's signature)

Title or Capacity:	Name and Address: Alex Eschenauer	Title or Capacity:	<u>Name and Address:</u> Austin Eckman			
□Manager	Name:	□Manager	Name:	12620	20th Street	
⊠Member	Address:	⊠Member		s:		
□Authorized	Parrish, FL 34219	□Authorized		sh FL	34219	
Dana.	<del></del>	Person				
Person	Other	Other	Other			
<del></del>						
	Lori Goldstein, Paralegal	□Manager	Nama:			
□Manager	Name: 605 Barsham Way	□!vtanagei	Name.			
□Member	Address:	□Member	Addres	s:		
⊠Authorized	Johns Creek, GA 30097	□Authorized				
Person		Person				
Other	Other	Other			Other	
□Manager	Name:	□Manager	Name:			
□Member	Address:	□Member	Addres	s:		
□Authorized		□Authorized				
Person		Person				
Other	Other	□Other			Other	
9. Attached is a cert jurisdiction under th of the translator mu 10. This document	is executed in accordance with section 605.0203 ment to the Department of State constitutes a thir	rida Department of State uly authenticated by the is in a foreign language (1) (b), Florida Statutes	official , a trans	Report for having curlation of the ware that as	orm. stody of records in ne certificate under ny false informatic	the roath

Typed or printed name of signce



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT "INVENTRKITS, PB LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR
REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY
AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF CONVERSION", FILED THE SIXTEENTH DAY OF NOVEMBER, A.D. 2022, AT 1:12 O'CLOCK P.M.

CERTIFICATE OF FORMATION, FILED THE SIXTEENTH DAY OF NOVEMBER,

A.D. 2022, AT 1:12 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "INVENTREITS, PB LLC".

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



Authentication: 202716711

Date: 02-15-23