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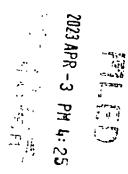
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### **COVER LETTER**

TO:

TO:	Registration Section Division of Corporations				
SUBJI	Vandir Holdings LLC ECT:				
		ame of Limited Liability Company			
		ty Company for Authorization to Transact Business in Fl ve referenced foreign limited liability company to transact			
Please	return all correspondence concerning this matter	er to the following:			
	Tangela Russell				
		Name of Person			
	Vandir Holdings LLC				
		Firm/Company			
	807 Berry Bramble Drive				
		Address		_ &	
	Brandon, FL 33510			2023 APR -3	وزيمه
	City/State and Zip Code				e ens d
	tangelawr@yahoo.com				الموادد و الموادد و
	E-mail address: (to	be used for future annual report notification)		PM h:	TE TE
For further information concerning this matter, please call:				կ։ 25	اشت
	Tangela Russell	813 934 0729 at ()	. **	•	
	Name of Contact Person	Area Code Daytime Telephone Num	iber		
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following amount Please make check payable to: FLORIDA D  \$125.00 Filing Fee \$130.00 Filing Certificat	EPARTMENT OF STATE			

# 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

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

COMPANY TO TRANSACT BUSINESS' IN THE STATE OF FLORIDA:

Name:	Tangela Russell	
Office Address:	807 Berry Bramble Drive	<del></del>
	Brandon	33510 , Florida
	(City)	(Zip code)

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.

(Registered agent's 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:	Name and Address:	Title or Capacity:	Name and Address:	
■Manager	Name: Tangela Russell	■Manager	Name:	
■Member	Address: 807 Berry Bramble Drive	■Member	Address: 807 Berry Bramble Drive	
Authorized	Brandon, FL 33510	■Authorized	Brandon, FL	
Person		Person		
□Other	Other	□Other	Other	
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other	Other D23	
			PR -	
□Manager	Name:	□Manager	Name: 43 m	
□Member	Address:	□Member	Address: 2	
□Authorized		□Authorized	<u> </u>	
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. Non-indexed 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.

Signature of an authorized person

SSC | SSC |

Typed or printed name of signee

# STATE OF WYOMING Office of the Secretary of State

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

## VanDir Holdings LLC

is a

# **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **April 18, 2022**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2022-001104647**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 7th day of February, 2023 at 5:22 AM. This certificate is assigned ID Number 058321322.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.