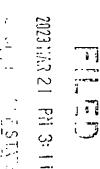
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COVER LETTER

	Hawg Management, LLC							
Name of Limited Liability Company								
	H"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cert and check are submitted to register the above referenced foreign limited liability company to transact business in							
Please r	all correspondence concerning this matter to the following:							
	Erik Zimmermann							
	Name of Person							
	Firm/Company							
	1208 W. Dixie Ave.	تحت						
	Address 50 50 50 50 50 50 50 50 50 50 50 50 50	\$ 4 						
	Leesburg, FL 34748	1 1 1 1 1						
	City/State and Zip Code المنابعة المنا							
	doctoez@yahoo.com							
	E-mail address: (to be used for future annual report notification)							
For furt	nformation concerning this matter, please call:							
	mett Hickey 800 3752453 at ()							
	Name of Contact Person Area Code Daytime Telephone Number							
	STREET ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations Registration Section Registration Section Clifton Building Lahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301							
	losed is a check for the following amount: use make check payable to: FLORIDA DEPARTMENT OF STATE							
	\$125.00 Filing Fee Status S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy of Status & Certified							

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:

oreign limited liability company is organized)	3	(FL) n	imber, il applica		
, , , , , , , , , , , , , , , , , , ,		(ble) .	
			,	202	
			; -	Ξ:	- 11 4
(Date first transacted business in Florida, if prior to	(registration)			5	=-
(See sections 605 0904 & 605,0905, U.S. to determ	nine penalty liability)			2	1
			1.17	72	1 1 1
nal Ottice)		(Mailing)	ر الطبرية التاريخ	ယှ	`_B'
	Leesh	ourg, FL 34748			
rik Zintmermann					
208 W. Dixie Ave.					
eesburg		. Florida			
	Florida registered agent: (P.O. Box	Leesh Florida registered agent: (P.O. Box NOT accepto	Telorida registered agent: (P.O. Box NOT acceptable)	Telorida registered agent: (P.O. Box NOT acceptable)	Florida registered agent: (P.O. Box NOT acceptable)

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: Edward Zimmermann Erik Zimmermann Manager 🔲 Manager Address: 3709 Green Brook Drive Address: 1208 W. Dixie Ave. Member ■ Member Leesburg, FL 34748 Valdosta, GA 31601 Authorized Muthorized | Person Person Other Other___ Other_ Other Manager Member Member Address: Address: Authorized ☐ Authorized Person Person Other____ Other___ Other_ Manager Name: Manager Name: Member Member Address: Address: Authorized 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 695/0203 (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 Erik Zimmermann

Typod or printed name of signee