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#### COVERLETTER

Hermleigh Motion, LLC		
IECT:Nan	ne of Limited Liability Company	
nclosed "Application by Foreign Limited Liability ence, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Creferenced foreign limited liability company to transact busine	
e return all correspondence concerning this matter	to the following:	
Anthony Choneifati, lisq.		
	Name of Person	
Cook Legal Group, LLLP		
	Firm/Company	
12505 Memorial Dr. Stc. 330	This	
	Address	
Houston, TX 77024		
(	Tity State and Zip Code	
A CHOUE IFATPa COOKLEGALGRO	UP.COM	
E-mail address; (16 b	e used for future annual report notification)	
orther information concerning this matter, please ca	II:	
ANTHONY CHOUEIFATI, ESQ.	713 341-2740	
Name of Contact Person	at () Area Code Daytime Telephone Number	
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	

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

IN COMPLEMCT, WITH SECTION (0):0002, FLORID ENTAIT HIS THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKON LIMITED ITABILITY COMPANY TO TRANSFER THE SENESS IN THE SECTEORID F

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t name on (v.otable) enter alternate t	same adopted for the purpose of transacting trustiless in 1 h	ond). The aberure	name fund metude 1 omfed f	Co E	3
Texas			116157	700	د موسی نر
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	(Date first transacted business in Horida, if prior to t (See sections 608-0904 & 605-0905 1-8) to determin	registration 1 ne penalty hability:		in the second	PH :
12508 Memorial Dr. 8	to 330	12505	Memorial Dr. Ste. 3.	30	' دب
			Mailing Address)		_ <u>~</u> ~_
Cit A lances of Praisipal Office		•	Mailing Address)	111	
Houston, TX 77024		Houst	on, TX 77024		
				<u></u>	
Name and <u>street addres</u>	ss of Florida registered agent; (P.O. Box	NOT accepts	ible)		
Name and <u>street addres</u>	<u>ss</u> of Florida registered agent; (P.O. Box	NOT accepts	ible)		
	ss of Florida registered agent; (P.O. Box NRAI Services, Inc.	NOT accepts	ible)		
Name and <u>street addres</u> Name:		NOT accepts	ible)		
Name:		NOT accepts	ible)		
	NRAI Services, Inc.	NOT accepts	able)		
Name:	NRAI Services, Inc.	NOT accepts	33324 Florida		

#### 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.

Jennifer Durussel Jennifer Durussel, Assistant Secretary
(Registered igent 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	<u>:</u>	Name and Address:
⊐Manager	Name: LJW Ventures, LP	□Manager	Name:	
■Member	Address: 12505 Memorial Dr. Ste 330	∐Member	Address:	
□Authorized	Houston, TX 77024	_lAuthorized		
Person		Person		
JOther	]Other	□Other		Tother 28
lManager	Name:	∃Manager	Nume	THE PARTY OF THE P
-		1 Manager	Name:	1
Member	Address:	□Member	Address:	
Authorized		ZIAuthorized		
Person		Person		
TOther	Other	□Other		Other
≟Manager	Name:	∐Manager	Name:	
IMember	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
.]Onher	Other	Other	<del></del>	2.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 purisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under outh 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.

Anthony Choucifati, Esq.

Exped or printed name of signer

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



Jane Nelson Secretary of State

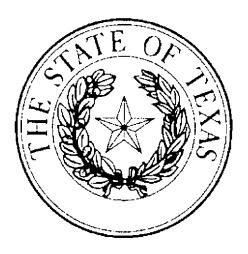
### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document. Certificate of Formation for Hermleigh Motion, LLC (file number 803124688), a Domestic Limited Liability Company (LLC), was filed in this office on September 21, 2018

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 March 14, 2023.



Jane Melson

Jane Nelson Secretary of State

Dial: 7-1-1 for Relay Services Document: 1229430900002