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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 6K Haida LL (Limited Liability Company
The enclosed "Application by Foreign Limited Liability Comp Existence, and check are submitted to register the above refere	pany for Authorization to Transact Business in Florida," Certificate of enced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the	following:
Brandon Loveri	dge ame of Person
Goodwin Knight	irn/Company
8605 Explorer	Orive, Swite 250
Colorado Springs	tate and Zip Code
5/overidge@guoc	tate and Zip Code W. N. Night, wom d for future annual report notification)
For further information concerning this matter, please call:	ω ',
Name of Contact Person	at (749) 598-5190 75 75 75 Area Code Daytime Telephone Number, 75
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 DEPART \$\mathbb{Z}\$\ \$125.00 \text{ Filing Fee} \qquad \qquad \text{S130.00 \text{ Filing Fee} & Certificate of Sta	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTI'S, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN-LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. CM Florida LLC (Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")
Godwin Knight Florida 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 "LI.C.")
2. (Uurisdiction under the law of which foreign limited liability company is organized) 3. EIN: 92-1436362 (FEI number, if applicable)
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 8605 Explorer Orive, Suite 250 6. 8605 Explorer Orive, Suite 250 (Mailing Address)
5. 8605 Explorer Orive, Suite 250 6. 8605 Explorer Orive, Suite 250 (Mailing Address) Colorado Springs, CO 80920 Colorado Springs, W: 80120
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Bruce R. Peele 35
Office Address: 4106 Eliot Place
Plant City, Florida 33566 (City) City (City)
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.

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Bruce Peele **⊠**Manager ⊠Manager Address: 4106 Elish Address: 8605 Explorer Drive ☐ Member [] Member Colorado Springs, CO 80920 □ Authorized □ Authorized Person Person Other__ □Other_____ □Other Name: 10m Hennessy □Manager □Manager Address: 8605 Explorer Drive ☑Member **⊠**Member □ Authorized □ Authorized Person Person □Other_ □Other______ □Other_ □Manager Name: □! danager Address: □Member Address: _____ □Member □ 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 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

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I. Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

GK Florida LLC

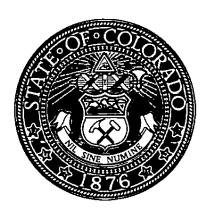
is a

Limited Liability Company

formed or registered on 12/22/2022 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20228236566.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/31/2023 that have been posted, and by documents delivered to this office electronically through 02/01/2023 @ 13:30:14.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/01/2023 @ 13:30:14 in accordance with applicable law. This certificate is assigned Confirmation Number 14663664



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.coloradosos.gov/bt:CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, https://www.coloradosos.gov/click"Businesses.trademarks.trade.numes" and select "Frequently Asked Questions."

*******************End of Certificate*****



March 25, 2023

BRANDON LOVERIDGE 8605 EXPLORA DRIVE STE 250 COLORADO SPRINGS, CO 80920 US

SUBJECT: GOODWIN KNIGHT FLORIDA LLC

Ref. Number: W23000040764

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

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Sharon D Franklin Regulatory Specialist II

RECEIVED

Letter Number: 723A00006907