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A. Jones

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

IN COMPLANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (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.") 2.Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 6. 2065 Futana Way, Wellington, FL 33414 (Mailing Address) 2065 Futana Way, Wellington, FL 33414 (Street Address of Principal Office) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Fredrik Wannius Name: 2065 Futana Way Office Address: Wellington 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: Adam Friedman Francis Greenburger □Manager Name: \_\_\_\_\_\_ Name: ■Manager Address: \_\_\_\_\_ **■**Member Address: \_\_\_\_ **≡**Member 251 Bernhart Drive 55 5th Ave FL 15. Authorized □ Authorized Amherst, NY 14226 New York, NY 10003 Person Person □Other\_\_\_\_ Other\_\_\_\_\_\_ Other\_\_\_\_ □Other \_\_\_\_\_ 3DD investments LLC Fredrik Wannins □Manager Name: \_\_\_\_\_ Name: \_\_\_\_\_ □Manager Address: ■Member Address: \_\_\_\_ □Member 2065 Futana Way 2065 Futana Way □ Authorized **■**Authorized Wellington, FL 33414 Wellington, FL 33414 Person Person □Other\_\_\_\_\_ □Other\_\_\_\_\_ Other\_\_\_\_ □Other Name: □Manager □Manager 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

Typed or printed name of signee

Fredrik Wannius

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## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "IPRINT LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTY-FOURTH DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "1PRINT LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JANUARY, A.D. 2022.

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

6559981 8300 SR# 20231134612

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jahrey W. Balleck, Secretary of State

Authentication: 203002839

Date: 03-24-23