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below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : 120220000070 : (888)462-3453 Fax Number : (877)919-2613

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: EFILE1234@INCFILE.COM

Foreign Limited Liability Company DEE GAUTHAM FITNESS LLC

Certificate of Status	1
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Page Count	05
Estimated Charge	\$130.00

(3

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COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	cr: DE	E GAUTHAM FITNESS LLC Name of Limited Liability Company
The enc Existence	losed "Application by Foreign Limited Liab ee, and check are submitted to register the a	pility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida.
Please r	eturn all correspondence concerning this ma	atter to the following:
	Lovette Dobson	
		Name of Person
		Firm/Company
	17350 State Hwy 24	19, #220
		Address
	Houston, TX 77064	
		City/State and Zip Code
	EFILE1234@INCFI	LE.COM (to be used for future annual report notification)
For fort	ner information concerning this matter, plea	
i (ii fuiti	ici information concerning this matter, prea	
	Lovette Dobson Name of Contact Person	at (1 Area Code) 888-462-3453 Daytime Telephone Number
	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 amort Please make check payable to: FLORIDA ☐ \$125.00 Filing Fee ✓ \$130.00 Filing Centific	DEPARTMENT OF STATE

(((H23000185217 3)))

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOILOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate i	name adopted for the purpose of transacting business is	Florida. The alternate name must include "Limited Liability Company,"	"LL.C," or "LLC.")	
2. Texas Unisdiction under the law of w	hich foreign limited liability company is organized)	3. (FEI number, if applicable)		
4.	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to dete	to registration) mine penalty liability)		
5. 1150 Nw 72nd (Street Address of Principal Office)	d Ave Tower I	6. 1150 Nw 72nd Ave Towe	er l	
Ste 455 #10802		Ste 455 #10802		
Miami, FL 331	26	Miami, FL 33126	2023 H	
7. Name and street address	ss of Florida registered agent: (P.O. B	ox NOT acceptable)	FILE AY 19	
Name:	REPUBLIC REGISTERE	D AGENT LLC	PN 1:	
Office Address:	1150 Nw 72nd Ave Towe	r I Ste 455	ਜ਼ਿਲ੍ਹ 59	
	Miami	, Florida 33126		
	(Cry)	(Zip code)		
designated in this applica- to comply with the provisi	gistered agent and to accept service of tion, I hereby accept the appointment	f process for the above stated limited liability comp as registered agent and agree to act in this capaci er and complete performance of my duties, and I d	ity. I further agree	

x. 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: Diksha Gautham	Manager	Name:	
∠Member	Address: 900 Folsom St	(Member	Address:	
Authorized	Apt 470	C.Authorized		
Person	San Francisco, CA 94107	Person	·	
Other		Other	 -	⊡Other
"Manager	Name:	□Manager	Name:	
Member	Address:	∐Member	Address:	
Authorized		JAuthorized		
Person		Person		
Other	COther	Other		[]()ther
			.,	
[_Manager	Name:	, _, Manager	Name:	
, ¹ Member	Address:	□Membei	Address.	
Authorized		□ Authorized		
Person		Person		
_jOther	□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 turisdiction 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. Lam aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817,155, F.S.

MS A Separative of me da	Canithat allowed person	

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



Jane Nelson Secretary of State (((H23000185217 3)))

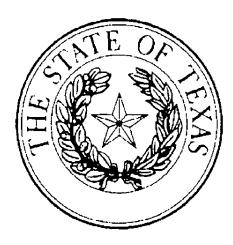
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for DEE GAUTHAM FITNESS LLC (file number 802866567), a Domestic Limited Liability Company (LLC), was filed in this office on November 22, 2017.

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 May 17, 2023.



Jane Melson

Jane Nelson Secretary of State

Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 1247612040002