| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |

Office Use Only



400411276514

06/28/23--01025--005 \*\*160.00

PHLITTE 2023 JUH 28 PH 1: 40 SECRETARY FRIATE

## **COVER LETTER**

Registration Section Division of Corporations

TO:

| SUBJECT:      | Kobes Legal PLLC                      | Kobes Legal LLC for purposes of transacting business in Florida   |   |
|---------------|---------------------------------------|---|---|
|               |                                       | Name of Limited Liability Company   |   |
|               |                                       | gn Limited Liability Company for Authorization to Transact Business in Florida, o register the above referenced foreign limited liability company to transact busi      |   |
| Please return | all correspondence conc               | cerning this matter to the following:   |   |
|               | Brett Kobes                           |   |   |
|               |                                       | Name of Person  | , |
|               | Kobes Legal PLL                       | LC  |   |
|               | -                                     | Firm/Company  |   |
|               | 118 Downing Ave                       | re N. Suite B   |   |
|               |                                       | Address   |   |
|               | North Bend, WA                        | . 98045   |   |
|               | <del> </del>                          | City/State and Zip Code   |   |
|               | brett@kobeslegal.d                    | .com  |   |
|               | E-                                    | 2-mail address: (to be used for future annual report notification)  | , |
| For further i | nformation concerning th              | his matter, please call:  |   |
| Bre           | ett Kobes                             | 702 324-4859  |   |
|               | Name of C                             | Contact Person Area Code Daytime Telephone Number   |   |
| Re            | illing Address:<br>gistration Section | Street Address:<br>Registration Section   |   |
|               | vision of Corporation                 | •   |   |
|               | D. Box 6327<br>Hahassee, FL 32314     | The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tallahassee, FL 32303  |   |
| Ple           |                                       | following amount:  to: FLORIDA DEPARTMENT OF STATE  S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee.  Certificate of Status Certified Copy of Status & Cer |   |

## 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:

| I. Kobes Legal PLLC                  | Limited Liability Company; must include "Limite  | 11 - 1 - 1 - 2 - 2 - 2 - 2 - 2     | 0.01 1 / 0.00 (A) |                     |             |                      |
|--------------------------------------|--|------------------------------------|---|---------------------|-------------|----------------------|
| Kobes Les                            | , , ,  | а павицу Со                        | ompany, father, or the )                              |                     |             |                      |
| ~                                    | ame adopted for the purpose of transacting business in Fl  | orida. The alter                   | nate name must include "Limited Lia                   | ability Company," ' | 1. L. C." ( | <u>π"L</u> LC")      |
| Washington State                     |  | 84<br>3.                           | 4-2973570   |                     |             |                      |
| (Jurisdiction under the law of w     | nich foreign limited liability company is organized)   | J                                  | (H.I numbe  | er, (l'applicable)  |             |                      |
| N/A<br>4.                            |  |                                    |   |                     |             |                      |
|                                      | (Date first transacted business in Florida, if prior to<br>(See sections 605-0904 & 605-0905, F.S. to determ | registration )<br>me penalty liabi | day)  | <del></del>         |             |                      |
| 5                                    | ammock Rd #5, Naples, Florida  |                                    | Ame as Street Address (Mailing Address)               |                     |             |                      |
| (Street Address of Principal Office) |  |                                    | (Mailing Address)                                     |                     |             |                      |
|                                      |  |                                    |   |                     |             |                      |
|                                      |  |                                    |   |                     |             | _                    |
|                                      |  |                                    |   | البا<br>دب          | 2028        |                      |
| 7. Name and street addres            | s of Florida registered agent: (P.O. Box   | NOT acc                            | eptable)  | CRETARY (           | JUN 28      | -                    |
| <u> </u>                             |  |                                    |   |                     | 28          | )<br>)<br>)<br>(1871 |
| Name:                                | Registered Agents Inc  |                                    |   | 1-1                 | PH 1:40     |                      |
| Office Address:                      | 7901 4th St N, Ste 300   |                                    |   | . 10<br>2점<br>-     | 0.1         |                      |
|                                      | St Petersburg  |                                    | 33702   |                     |             |                      |
|                                      | (City)   |                                    | , Florida(Zip code)                                   |                     |             |                      |

## 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.

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

| Title or Capacity: | Name and Address:                   | Title or Capacit | <u>y:</u>  | Name and Address |
|--------------------|-------------------------------------|------------------|------------|------------------|
| Manager            | Name: Brett Kobes                   | □Manager         | Name:      |                  |
| ∃Member            | Address: 118 Downing Ave N, Suite B | □Member          | Address:   |                  |
| Authorized         | North Bend, WA 98045                | □Authorized      |            |                  |
| Person             |                                     | Person           |            |                  |
| ]Other             | Other                               | □Other           |            | □Other           |
| Manager            | Name:                               | □Manager         | Name:      |                  |
| Member             | Address:                            | □Member          | Address: _ |                  |
| ]Authorized        |                                     | □Authorized      |            |                  |
| Person             |                                     | Person           |            |                  |
| Other              | Other                               | □Other           |            | □Other           |
| ]Manager           | Name:                               | □Manager         | Name:      |                  |
| Member             | Address:                            | □Member          | Address: _ |                  |
| Authorized         |                                     | □Authorized      |            |                  |
| Person             |                                     | Person           |            |                  |
|                    |                                     | □Other           |            | □Other           |

10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

| But Khs                                 |  |
|---|--|
| <br>Signature of an authorized person   |  |
| Brett Kobes                             |  |
| <br>Transit in Northell comment classes |  |

# The State of Washington

# Secretary of State

LSTEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

## CERTIFICATE OF EXISTENCE

OF

### KOBES LEGAL PLLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 09 06 2019.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records in the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all tees, interest, and penalties owed and collected through the Secretary of State have Secondard I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filling and that proceedings for administrative dissolution are not pending.



Sten R Hollie.