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Special Instruction	s to Filing Officer:
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CORPORATE ACCESS, _____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

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XX	РНОТОСОРУ		<u> </u>	**	
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SPECIA INSTRU	AL JCTIONS:				
					

COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT:	Respondology, LLC		
		Name of Limited Liability Company	
The enclosed Existence, a	d "Application by Foreign Limited Lia nd check are submitted to register the a	bility Company for Authorization to Transact Business in Florida." Gabove referenced foreign limited liability company to transact busine	Certificate of ss in Florida.
Please return	n all correspondence concerning this m	natter to the following:	
	Rachel Sutherland		
		Name of Person	
	Respondology		
		Firm/Company	
	2000 Central Ave; Ste 100		
		Address	
	Boulder, CO 80301		
		City/State and Zip Code	
	rachel@respondology.com		
	E-mail address:	(to be used for future annual report notification)	
For further is	nformation concerning this matter, plea	ase call:	
Ra	chel Sutherland	406 529-2467	
	Name of Contact Person	Area Code Daytime Telephone Number	
<u>Ma</u>	iling Address:	Street Address:	
	gistration Section	Registration Section	
	vision of Corporations	Division of Corporations	
	D. Box 6327	The Centre of Tallahassee	
Tal	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Plea	closed is a check for the following amo ase make check payable to: FLORIDA \$125.00 Filing Fee	A DEPARTMENT OF STATE	

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 LIABILI. COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liabil	ity Company," "L.L C," or "L"	
Delaware		45-3635548		
(Jurisdiction under the law of w	shich foreign limited liability company is organized)	3. (FEI number, if applicable)		
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistration)	_	
	(See sections 605.0904 & 605.0905, F.S. to determine	penalty liability)		
2000 Central Ave		2000 Central Ave 6.		
reet Address of Principal Office)		(Mailing Address)		
Ste 100		Ste 100		
Boulder, CO 80301		Boulder, CO 80301	2020 (
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	1 6:5	
Name:	Registered Agent Solutions, Inc.		3 5	
Office Address:	2894 Remington Green Ln; Ste A	· •	6.	
	Tallahassee	32308 Florida		
	(Cny)	(Zip code)		
egistered agent's accep aving been named as re	stance: gistered agent and to accept service of pro- tion, I hereby accept the appointment as i	ocess for the above stated limited liab	pility company at the	

(Registered agent's signature)

Samantha Niels, Assistant Secretary

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: Name and Address: Name: __ Rachel Sutherland **■**Manager □Manager Address: 2000 Central Ave; Ste 100 2000 Central Ave; Ste 100 Address: □Member ☐ Member Boulder, CO 80301 Boulder, CO 80301 **Authorized** ☐ 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____ □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. Rachel Sitherland

Typed or printed name of signee

Rachel Sutherland



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

DELAWARE, DO HEREBY CERTIFY "RESPONDOLOGY 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 FIRST DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RESPONDOLOGY LLC" WAS FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2011.

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

Authentication: 203871365

Date: 08-01-23

5053881 8300 SR# 20233139154