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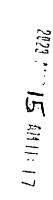
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## COVER LETTER

то:	Registration Section Division of Corporations			
SUBJEC	Wilmore Capital LLC			
		ame of Limited Liability Company		
The encl Existenc	osed "Application by Foreign Limited Liabili e, and check are submitted to register the abov	ty Company for Authorization to Transact Business in Florida," Certificate of we referenced foreign limited liability company to transact business in Florida		
Please re	eturn all correspondence concerning this matte	er to the following:		
	Cody Smart			
		Name of Person		
	Wilmore Capital LLC			
		Firm/Company		
17116 Dashwood Creek Dr.				
		Address		
	Pflugerville TX 78660			
	-	City/State and Zip Code		
	cody@wilmorecapital.llc			
	E-mail address: (to	be used for future annual report notification)		
For furth	er information concerning this matter, please	call:		
Cody Smart		325 6681443		
	Name of Contact Person	Area Code Daytime Telephone Number		
	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 DI  \$\Bigsim \\$125.00 \text{ Filing Fee} \Bigsim \\$130.00 \text{ Filing I}  Certificate	EPARTMENT 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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. Wilmore Capital LLC	n Limited Liability Company; must include "Limit					
(Name of Foreign	n Limited Liability Company; must include "Limit	ed Liability Co	ompany," "L.L.C.," or "LLC")			
winnore Capital Mortga	ge Lending LLC					
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in	Florida, The alte	mate name must include "Limited Liabi	hty Company," "L.L.	C," or "l.	ŁC."ı
Texas						
2. (Jurisdiction under the law of s	which foreign limited liability company is organized)	3	(FEI number,	· · · · · · · · · · · · · · · · · · ·		
	o my oong ang no organistay		(hh) number,	if applicable)		
1						
····	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, U.S. to determ	o registration.)		<del></del>		
		nine penalty liab	iluy)			
	lound Rock., TX 78664	30	46 Blantyre BendRound Ro	ek,, TX 78664		
Street Address of Principal Office)		6	(Mailing Address)	<del></del> _		
			•			
		•••				
7. Name and a second						
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acco	eptable)			
Maure	Registered Agents Inc			, <u>-</u>		
Name:		<del>_</del>	<del></del>	١٠.		
	7901 4th St N Ste 300				7.3	
Office Address:					حمث 	
	St. Petersburg				5	
	St. retersourg		. Florida 33702 (Zip code)		BEST STORY	
	(Cuy)		(Lip code)	_	7-	<del>(-</del> -
degistered agent's accep				-	=======================================	`
laving been named as re	vistered agent and to accept service of	pracose for	tha akana rarat timbrat r	. *4*.	• •	
		and compl	ete performance of my dutie	us capacity. 1 es. and Lam fo	jurine amiliar	r agre with
na accept the obligation:	s of my position as registered agent.		, ,	, <i> </i>	*********	N7177
	0.1.					
	Part Roberts					
	(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 manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity	Name and Address
<b>≘</b> Manager	Name: Cody Smart	■Manager	Name:
□Member	Address: 17116 Dashwood Creek Dr	□Member	Address: 2046 Blantyre Bend
□Authorized	Pflugerville TX 78660	□Authorized	Round Rock TX 78664
Person		Person	
Other	Other	□()ther	Other
■Manager	Gregory Gottsacker Jr Name:	□Manager	Name:
∐Member	Address: 2716 Blake St	□Member	Address:
□Authorized	Austin Tx 78748	□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

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.

	Coly mand	
77-714.3	Signature of an authorized person	
Cody Smart		
	Exped or printed name of signee	

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



## 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 Wilmore Capital LLC (file number 804612148), a Domestic Limited Liability Company (LLC), was filed in this office on June 16, 2022.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: June 22, 2022

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 August 02, 2023.



Jane-Helson

Jane Nelson Secretary of State