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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : INCFILE.COM LLC
Account Number : I20220000070
Phone : (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
Transcend LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	$130.00

RECEIVED
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OFFICE OF THE SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 SEP -6 PM 3:28

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Transcend LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

LOVETTE DOBSON
Name of Person

Firm Company

17350 STATE HWY 249 STE 220
Address

HOUSTON, TX 77064
City, State and Zip Code

EFILE1234@INCFILE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LOVETTE DOBSON at (1) 888-462-3453
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 DEPARTMENT OF STATE**

☐ $125.00 Filing Fee ☒ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy

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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:

1. Transcend LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

Transcend-Kintsugi 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. Idaho
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0902(1)(k) & 605.0905, F.S. to determine penalty liability)

5. 8647 Pensacola Blvd
(Street Address of Principal Office)

Pensacola, FL 32534

6. 8647 Pensacola Blvd
(Mailing Address)

Pensacola, FL 32534

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: REPUBLIC REGISTERED AGENT LLC

Office Address: 1150 Nw 72nd Ave Tower I Ste 455

Miami, Florida 33126
(City) (Zip code)

2023 SEP -6 PM 3:28

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.

Wesley Dolan
(Registered agent's signature)

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8. (Optional) 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 Raimi Monroe	Manager	Name Ren Geers
☒ Member	Address 8647 Pensacola Blvd	☒ Member	Address 447 Broadway
Authorized	Pensacola, FL 32534	Authorized	2nd Floor #691
Person		Person	New York, NY 10013
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 ____	Other ____

Additional Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-listed 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.

Raimi Monroe

Raimi Monroe

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STATE OF IDAHO

Phil McGrane | Secretary of State
Business Office
450 North 4th Street
PO Box 83720
Boise, ID 83720

August 31, 2023

Request Type: Certificate of Existence/Filing
Request #: 0005376500
Receipt #: 000871904

Issuance Date: 08/31/2023
Copies Requested: 0

Regarding: **Transcend LLC**
Filing Type: Limited Liability Company (D)
Formation/Qualification Date: 06/03/2019
Status: Active-Existing
Duration Term: Perpetual

File # : 3530385
Formation Locale: IDAHO
Inactive Date:

Certificate of Existence

I, Phil McGrane, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

Transcend LLC

is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above.

Phil McGrane
Idaho Secretary of State

Processed By: Business Division

Verification #: 025151422

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