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Division of Corporations

Fax Number : (850)617-6383

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Account Name : THE FARAH LAW FIRM, P.A.

Account Number : 120050000023 Phone : (904)443-9968 Fax Number : (984)443-8861

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### Foreign Limited Liability Company RZH Investments, LLC

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SEP 1 8 2023 K. Brumble)

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGOV LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

A		name adopted for the purpose of transacting business in F	logida. The atternate nation must	include "Control Light	hty Compans," "1	,1 C,1 o	r"GCC")
4065 Ledgestone Drive 4065 Ledgestone Drive 5.  Annee Address:  Troy, Michigan, 48098  Troy	Arizona 2		3.				
4065 Ledgestone Drive 5.	Omisidiction under the law of s	shich foreign binned hability commany is organized)		(Fill number,	if applicable)		· <del></del>
4065 Ledgestone Drive 5.	4.						
Troy, Michigan 48098		(Date first transacted business in Florida, if prior to (See sections 605,0804 & 605,0908, F.S. to detern	registration ) time penalty (tability)				
Troy, Michigan 48098	4065 Ledgestone Driv	c	4065 Ledgesti	one Drive			
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  The Farah Law Group  Name:    0550 St. Augustine Road, Suite 103	(Street Addless of Principal Office)		O. (Mailing Add	dress)	_ · - · · · · · · · · · · · · · · · · ·	<del></del>	• –
Name:    The Farah Law Group	Troy, Michigan, 4809;	3	Troy, Michiga	in 48098			
Name:    The Farah Law Group		<del></del>	er m v drift v fl. y pays a gar en sa sapon in sayen in	t Pill for all gament speakstipped with best processes.	the hand or construction con		-1
Name:    The Farah Law Group	common magazinia.	and the state with a Mark and a state and a state of the				~	
Name:    The Farah Law Group		A.II. 14			<u>:</u> ; .	)23 S	•
Name:    5550 St. Augustine Road, Suite 103	7. Name and <u>street addre</u>	<u>ss</u> of Florida registered agent: (P.O. Box	. <u>NOT</u> acceptable)		n: 44 71 -	Ü	- A. 学
Name:    0550 St. Augustine Road, Suite 103   105	71.	Farah Law Group				2	
Incksonville  Jacksonville  Jacksonville  (Cry)  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 agre to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with	Name:	-			•	PH	
Jacksonville  (City)  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 agre to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with	0.00	•			-44 6/2 7, 2 - 7, 3 -		<u></u>
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designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agre to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with	THE TONICS.	**************************************	Florid	(Zip code)			
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 accep	(Gry)		(Zip Gide)			
A A A	Registered agent's acception of the second agent's acception that are designated in this application in the second acceptance of the second accept	(Gay)  Diance: egistered agent and to accept service of juition, I hereby accept the appointment a	process for the above s is registered agent and	(519 code) Stated limited lia Lagree to act in 1	this capacity	. I fu	ther agree
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// (Registered agent's signature)	Registered agent's acception of the second agent and as red as red as red as granted in this applicate to comply with the provis	otance: egistered agent and to accept service of jetion, I hereby accept the appointment a ions of all statutes relative to the property of my position as registered agent.	process for the above s is registered agent and and complete perforn	(519 code) Stated limited lia Lagree to act in 1	this capacity ies, and I an	. I fu	ther agree

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: Zaid Hanoudi	LlManager	Name:	
□Member	Address: 4065 Ledgestone Drive	□ Member		
□Authorized	Troy, Michigan 48098	Authorized		
Person		Person		
[]Other		□Other	····	(10ther
٠,				
III Manager	Name:	□ Minager	Name:	C. T. C.
<b>EMember</b>	Address:	CiMember	Address:	
⊞Authorized		DAuthorized		
Person		Person		
□Other	CiOther	⊕Other		[]Other
El Manager	Name:	∭Manage:	Name:	
[]Member	Address;	III Member	Address:	
TAuthorized		□Authorized	12-2-2-2-2-2-2-1-1-1-1-1-1-1-1-1-1-1-1-	
Person		Person		Makhamatory, f. s
ClOther	CiOther	[]Other	<del></del>	DOther

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 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.

Signature of an authorized person

James Fire Regulation Agent

Typed or printed name of signace





# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

### CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

### RZH Investments LLC

ACC file number: 23534437

was incorporated under the laws of the State of Arizona on 05/26/2023, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave bereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 09/08/2023



Douglas R. Clark, Executive Director



