

10/3/23 10:51 AM

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (350)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.
 Account Number : I2008000045
 Phone : (302)645-7400
 Fax Number : (302)645-1280

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: palmcapitaladvisor@gmail.com

Foreign Limited Liability Company
 Score and Defend, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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Corporate Filing Menu

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3

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN COMPLIANCE WITH SECTION 608 OF THE FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA1 Score and Defend, LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company" or "LLC" or "LLP")

This company, liability, or other alternate name adopted for the purpose of transacting business in Florida is the same as the name of the company "Score and Defend, LLC" located in

2 Georgia

(Place of origin under the law of which foreign limited liability company is organized) 3 1140066100 (Tax ID#)4 _____
(If the foreign limited liability company is organized in a jurisdiction that does not require a tax ID number, please enter "N/A")5 2637 Barbara Drive

(Street Address of Principal Office) 6 2637 Barbara Drive

(Principal Address)Fort Lauderdale FL 33316

Fort Lauderdale FL 33316

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

Name	Calvin Simmons III
Office Address	2637 Barbara Drive
	Fort Lauderdale
	Florida 33316

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)

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 STATE
 TALLAHASSEE, FL

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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]

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☐ Manager	Name <u>Calvin Simmons III</u>	☐ Manager	Name _____
☒ Member	Address <u>2637 Barbara Drive</u>	☐ Member	Address _____
☐ Authorized	<u>Fort Lauderdale FL 33316</u>	☐ 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 _____	☐ Other _____

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 065.020(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. 817.135, F.S.



Calvin Simmons III

Signature of the filer

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Control Number 23207687

STATE OF GEORGIA**Secretary of State**

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Score and Defend, LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number 26122557
Date Inc/Auth Filed 09/25/2023
Jurisdiction Georgia
Print Date 10/03/2023
Form Number 211

*Brad Raffensperger*

Brad Raffensperger
Secretary of State

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