Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230003501813)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (813)436-5206

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Email Address:

Foreign Limited Liability Company FanAngel, LLC

Certificate of Status	. 0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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

IN COMPLANCE WITH SECTION 605,0902, FLORIDA STATUTES THE FOLLOWING INSUBMITTED TO REGISTER A FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Name of Foreign	Limited Liability Company, must include "Limited	Liability Company," L.L.C., or "LLC.")			
II name unavailable, enter alternate i	name adopted for the purpose of transacting business of Els	erda. The alternate name must include "Limited	Linbility Company," "L.I. C,"	or "LLC ")		
<u>,</u> UT		3 47-1542245				
(Jurisdiction under the law of w	hich foreign limited hability company is organized;	(EFT number, if applicable)				
1	(Date first transacted business in Florida, (1 poor to)					
	(See sections 60) (1904 & 50) (1905). E.S. to determine	egistration (
7901 4th St N		7901 4th St N				
Street Address of Principal Office)		6. (Mailing Address)				
STE 300		STE 300	· · · · · · · · · · · · · · · · · · ·			
St. Petersburg, FL 337	02	St. Petersburg, FL 33702				
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	1:1	TOO ECR5		
Name:	Registered Agents Inc		7 HA			
Office Address.	7901 4th St N STE 300		- 0	Å		
	St. Petersburg	, Florida 33702		n D		
t(gy)		(Zip ciste)				

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.

(hdg)-tered agent's signature)

Tc 18506176383

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 Capacit	<u>y:</u>	Name and Address:
□Manager	Name: Burton, John	□Manager	Name:	
XMembei	Address: 7901 4th St N STE 300	[]Member	Address: _	
□Authorized	St. Petersburg, FL 33702	l Authorized		
Person		Person		
□Other	□Other	□ Other		[]Other
□Manager	Name:	El Manager	Nume:	
□Member	Address:	. Member	Address:	
□Authorized		CAuthorized		
Person		Person		
[]Other	□Other	□Other		⊖Other
L!Manager	Name:	∟ Manager	Name:	-
□Member	Address:	Member	Address:	
□Authorized		E.Amhorized		
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. 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.

Rubita	a francis	
	Signature of an authorized person	
Robin Jones		
	Esped or printed name of signee	



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705
Salt Lake City, LT 84114-6705
Service Center: (801) 530-4849
Foll Free: (877) 526-3994 11tah Residents
Fax: (801) 530-6438
Web Site: http://www.commerce.utah.gov

10/05/2023 9125464-016010052023-111270

CERTIFICATE OF EXISTENCE

Registration Number: Business Name:

Registered Date: Entity Type:

Status:

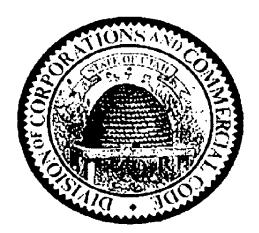
9125464-0160

FANANGEL , LLC August 08, 2014

11.C - Domestic

Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



L'Weillette

Leigh Veillette Director Division of Corporations and Commercial Code