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LAZARUS CORPORATE

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
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Foreign Limited Liability Company  
SATDOS LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 03       |
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60:2 PM 12/13/2033

FLORIDA  
DIVISION OF  
CORPORATIONS  
TALLAHASSEE, FL

SECRETARY OF STATE  
TALLAHASSEE, FL

2023 OCT 12 AM 10:16

FILED

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. SATDOS LLC

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

SATDOS GROUP 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. NEVADA

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 84-5148493

(FEI number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

2217 MCKINLEY ST

5. (Street Address of Principal Office)

HOLLYWOOD, FL 33020

2217 MCKINLEY ST

6. (Mailing Address)

HOLLYWOOD, FL 33020

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

Name:

JEREMIAH'S SERVICE CORP

Office Address:

220 MIRACLE MILE STE A224

CORAL GABLES

(City)

, Florida

33134

(ZIP code)

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.

Jeremy Batancourt  
(Registered agent's signature)

FILED  
2023 OCT 12 AM 10:16  
SECRETARY OF STATE  
TALLAHASSEE, FL

8. For initial indexing purposes, list names, title or capacity and addresses of the primary member/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:

Name and Address:

☒ Manager

Name: GABRIEL DOS SANTOS

☐ Member

Address: 2217 MCKINLEY ST

☐ Authorized

HOLLYWOOD, FL 33020

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ Other

☐ Other

Title or Capacity:

Name and Address:

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ 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 505.0203 (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

GABRIEL DOS SANTOS

## SECRETARY OF STATE

CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SATDOS LLC**, as a DOMESTIC LIMITED-LIABILITY COMPANY? (86) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 03/17/2020, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 10/05/2023.

FRANCISCO V. AGUILAR  
Secretary of State

Certificate Number: B202310054014952

You may verify this certificate  
online at <http://www.nvsos.gov>