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

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To;

Division of Corporations

Fax Humber : (839)617-6333

From:

Account Name : HAND ARENDALL HARRISON SALE LLC

Account Number : 120190003128 Phone : (850)769-3434 Fax Number : (830)764-6121

Thenter the email address for this business entity to be used for future about report mailings. Enter only one exall address please.**

Essai: Address: jcampfield@handfirm.com

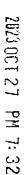
Foreign Limited Liability Company 828 Ventures, LLC

Certificate of Status	1
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COVER	LETTER
TO: Registration Section Division of Corporations	
SUBJECT: 828 VENTURES, LLC	
	rd Liability Company
The enclosed "Application by Foreign Limited Liability Company Existence, and check are submitted to register the above referenced	for Authorization to Transact Business in Florida." Certificate of foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the follo	wing:
MATT STAVER	
Name o	of Person
828 VENTURES, LLC	
Firm/C	ompany
1197 AIRPORT ROAD, BLDG 1	
Adi	fress
DESTIN, FL 32541	
City/State a	nd Zip Code
JCAMPFIELD@HANDFIRM.COM	·
E-mail address: (to be used for i	uture annual report notification)
For further information concerning this matter, please call:	
JESSICA CAMPFIELD	850 650-0010
Name of Contact Person	Area Code Daytime Telephone Number
	et Address: distration Section
	ision of Corporations
·	Centre of Tallahassee
Tallahassee, FL 32314 241	5 N. Monroe Street, Suite 810
Tall	ahassee, FL 32303
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENTS S125.00 Filing Fee \$\infty\$ \$130.00 Filing Fee & Certificate of Status	ST OF STATE \$155.00 Filing Fee & S160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy

To:

DecuSign Envelope ID_ED1DAC21-98DC-4FFA-A675-E7E32FD84610

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

IN COMPLIANCE WITH SECTION 605.0902, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

DELAWARE	name adopted for the purpose of transacting business in E		lternate trace must metade "Estrated Ladulus Comp	sany," "L.L.C," er
	which foreign limited liability company is organized)	3.	applied for (FEI number, if applied	blei
			V 11 V 2 11 V 4 F 11 V	
	(Date first transacted basiness in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registratism me penalty l	iahitity)	
1197 AIRPORT ROA	D, BLDG I	6	1197 AIRPORT ROAD, BLDG 1	
et Ardress of Principal Othice)		··· -	(Mailing Address)	
DESTIN, FL 32541			DESTIN, FL 32541	
		-		
	·	_		
	CATTLE CAR CO. 1	NOT a	cceptable)	7
Name and street addre	ss of Florida registered agent: (P.O. Box	18(7) u		
Name and <u>street addre</u>) 57
Name and <u>street addre</u> Name:	HAND ARENDALL HARRISON SA		: 	
	HAND ARENDALL HARRISON SA	LE. LLC	: 	12 I J I J I 51
		LE. LLC	:	73 UCT 27 FR
Name:	HAND ARENDALL HARRISON SA	LE. LLC	: 32541 . Florida	::

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.

,	Dos. uSigned by
Dian of Monig	
(Begistered again's signature)	

To:

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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]:

Title or Capacity:	Name and Address:	Title or Capacit	<u>ty:</u>	Name and Address:
X Manager	Name: MYB HOLDINGS, LLC	∐Manager	Name:	
⊡Member	Address: 1197 AIRPORT ROAD, BLDG 1	□Member	Address: _	
□ Authorized	DESTIN, FL 32541	□Authorized		W
Person		Person		
_Other	Other	∐Other		_IOther
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address: _	
Authorized		□ Authorized		
Person		Person		
Other	Other	□Other	·	□Other
.∏Manager	Nanie:	□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. 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 8.817.155, F.S.

Document by	10/26/2023	
Signature of an authorized person		

MATT STAVER, as Manager of MYB HOLDINGS, LLC

To:

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "828 VENTURES LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF OCTOBER, A.D. 2023.

2430774 8300 SR# 20233646735

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204309460

Date: 10-04-23