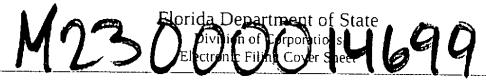
Division of Corporations



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.

(((H230003972173)))



H239003972173AEC1

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 : IZ0090000081

Phone : (307)200-2803

Fax Number

: (813)436-5206

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

Email	Address:		

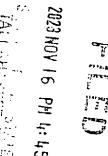
Foreign Limited Liability Company BIG ED LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help



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

IN COMPLIANCE WITH SECTION 6/5,0902, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY

(Name of Foreign	Limited Liability Company; must include "Limited	Liability Cir	inpany,""l. L.C.," or "LLC.")	
name unavariable, enter alternate	name adopted for the purpose of transacting business in FI	orida. The alien	rate name must include "Limited Liabi	lity Company," "L.E. C," or "I
Delaware		37	1979747	
Ourisdiction under the law of w	hich foreign limited liability company is organized)	3. (FEE number, if applicable)		
	Date first transacted business in Florida, if prior to oscie sections 605 0904 & 605 0905, F.S. to determi	registration.) ne penalty habil	(ity)	
7901 4th St N STE 300)	, 790	01 4th St N STE 300	
reet Address of Principal Office)		6.	01 4th St N STE 300 (Mailing Address)	
St. Petersburg FL 33702		St. Petersburg Ft 33702		
				
Name and street address	s of Florida registered agent: (P.O. Box	NOT acce	ptable)	202 10
	Registered Agents Inc			2023 NOV 16
Name:				
Office Address:	7901 4th St N STE 300			E E
Cornec predicas.				いか 相切 「
St. Petersburg			. Florida 33702	- 1
	(Cgy)			

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.

Dring Regions		
	(Registered agent's signature)	 _

11/16/2023 11:55:08 PST

To: 18506176383

Page: 3/4

From: Registered Agents Inc.

Fax: 8134365206

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:
□Manager	Gonzalo Goyanarte	□ Manager	Name:
K]Member	Address:	X Member	Address:
□Authorized	7901 4th St N STE 300	□Authorized	7901 4th St N STE 300
Person	St. Petersburg FL 33702	Person	St. Petersburg FL 33702
□Other	Other	Other	□Other
□Manager	Name:	□Manager	Nume:
□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 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.

	Robbin Joney	
···	Signature of an authorized person	
Robin Jones		
	Lyped or printed name of signee	

To: 18506176383



Page 1

From: Registered Agents Inc

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BIG ED 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIG ED LLC" WAS FORMED ON THE FIFTH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

at corp. delaware gov/auti

Authentication: 204608847

Date: 11-16-23