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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | | |
|--|---|---|--|--|--|--|--|
| SUBJE | Forecuity, LLC | | | | | | |
| Name of Limited Liability Company | | | | | | | |
| | | y Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida | | | | | |
| Please i | return all correspondence concerning this matter | r to the following: | | | | | |
| | Christopher L. Levesque, Sr. | | | | | | |
| | | Name of Person | | | | | |
| | Forecuity, LLC | | | | | | |
| | <u></u> | Firm/Company | | | | | |
| | 10 Justin Drive | | | | | | |
| | | Address | | | | | |
| | | | | | | | |
| | | City/State and Zip Code | | | | | |
| | chris@forecuity.com | | | | | | |
| | E-mail address: (to | be used for future annual report notification) | | | | | |
| For furt | ther information concerning this matter, please of | call: | | | | | |
| | Jonathan B. Kim, Esq. | at () 215-1553 Area Code Daytime Telephone Number | | | | | |
| | Name of Contact Person | Area Code Daytime Telephone Number | | | | | |
| Mailing Address: Registration Section | | Street Address: Registration Section | | | | | |
| Division of Corporations P.O. Box 6327 | | Division of Corporations | | | | | |
| | | The Centre of Tallahassee | | | | | |
| | Tallahassee, FL 32314 | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | | | |
| | Enclosed is a check for the following amount: Please make check payable to: FLORIDA DI S125.00 Filing Fee \$130.00 Filing I Certificate | EPARTMENT OF STATE | | | | | |

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| i manik (disvanatore, elue) aneriste (| явие адоряет тог тие разроче от папваетную отвинечь из гто | rida. The alternate name must include "Limited Liability Con | quany, 1,1.10, or 1.1.0. | | |
|--|---|--|--------------------------|--|--------------------------|
| Connecticut | | 93- <u>35</u> 84361 3. | | | |
| (Jurisdiction under the law of which foreign limited liability company is organized) | | (FEI number, if applicable) | | | |
| | | | | | |
| | (Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determin | gistration) e penalty liability) | | | |
| 4131 Laguna Street | | 4131 Laguna Street | | | |
| treet Address of Pruicipal Office) | | 6. (Mailing Address) | | | |
| Suite 515 Coral Gables, FL 33146 | | Suite 515 Coral Gables, FL 33146 | | | |
| | | | | | . Name and street addres |
| Name: | Jonathan B. Kim, Esq. | | 121 | | |
| Office Address: | 4131 Laguna Street, Suite 515 | | PH 3: 04 | | |
| | Coral Gables | 33146 , Florida | 40 | | |
| | (City) | (Zip code) | | | |

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 | Name: Christopher L. Levesque, Sr. | □Manager | Name: B.J. Pivonka |
| ■Member | Address: 10 Justin Drive | ■Member | Address: 8 Avebury Lane, |
| □Authorized | Ellington, CT 06029 | □Authorized | Tolland, CT 06084 |
| Person | | Person | |
| □Other | □ Other | □Other | Other |
| □Manager | Jonathan B. Kim Name: | □Manager | Name: Eric Brumfield |
| ■Member | Address: 4131 Laguna Street, Suite 515 | ■ Member | Address: 20 10 th St. NW, Unit 1802, |
| □Authorized | Coral Gables, FL 33146 | □Authorized | Atlanta, GA 30309 |
| Person | | Person | |
| □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.

Signature of an authorized person

Jonathan B. Kim

Typed or printed name of signee

Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Tuesday, November 07, 2023 11:19 AM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

Business Details

| Business Name | FORECUITY LLC | · · · · · · · · · |
|----------------|-------------------|-------------------|
| Business ALEI | US-CT.BER:0879572 | |
| Formation Date | 11/17/2006 | |

Secretary of the State

Business ALEI: US-CT.BER:0879572

Note: To verify this certificate, visit Business.ct.gov

Page 1 of 1

Certificate Number: C-00112108