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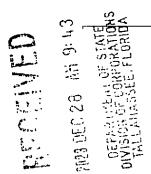
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dan@rasmussenco.com



Foreign Limited Liability Company RASMUSSEN MARINE LLC

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To:

Meredith Hellwig, Assistant Secretary

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

IN COMPLIANCE WITH SECTION 6650002, PLORIDA STATUTES, THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

II isanio unavaidable, enter alternate i	some adopted for the purpose of transacting business in Flo	resal The after	nate axme ness include "La	miled Lability Company," "L	L.C." or "LI	un.
Delaware		3				
(Jurisd chon under the law of w	nich foreign limited Hability company is organized)		<u> </u>	14 number, it applicable)		
Upon Filing						
	(Date first transacted business in Florida, if pino to i (See sections 605 6904 & 605,0905, F.S. to determin	egistration) se penalty liabi	htv i			
415 S. Cloverdale Stre			5 S. Cloverdale Str			
). Street Addiess of Principal Officer		0	(Mailing Advess)			
Scattle, WA 98108		Sea	attle, WA 98108			
Name:	s of Florida registered agent: (P.O. Box C T Corporation System	<u>NOT</u> acce	раосу		2023 DEC 26	
Office Address:	1200 South Pine Island Road			•	PH (
	Plantation		3332 Florida	4	٠ <u>.</u> ن	
	(City)		€Xib	ende)		
fesignated in this applica a comply with the provisi	tance: gistered agent and to accept service of p tion, I hereby accept the appointment as ons of all statutes relative to the proper s of my position as registered agent.	registeren	l agent and agree to	o act in this capacity.	I furthe	ragre
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	C.T. Corporation System	Mud	ien Helling	12/27/2023		
_	Jv:		· ()			

(Registered agent's Signature)

From: Kaity Toon

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8.	For initial indexing purposes,	list names, title or ca	apacity and addresses of	f the primary member	s/managers or persons	authorized to
ma	nage lup to six (6) totall:	•				

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
[™] Manager	Name: Daniel Ellis	□Manager	Name: Cord McConnick
☐Member	Address: 415 S. Cloverdale Street		Address: 415 S. Cioverdale Street
X Authorized	Seattle, WA 98108	X Authorized	Seattle, WA 98108
Person		Person	
Authorized Other	Personer COher	Authorized Pers	Other
Manager	Name: Michael Smith	— ШМападет	Name:
□Member	Address: 415 S. Cloverdale Street	∐Member	Address:
X Authorized	Seattle, WA 98108	□ Authorized	
Person		l'erson	
Other Authorized	Person	□ Other	□ Othe1
☐ Manager	Name:	П Маладет	Name:
☐ Member	Address:	□Member	Address:
☐ Authorized		□ Authorized	499 - 199 -
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.

DocuSigned by:		
Dan Ellis		
9884691808787447	Signifure of an authorized person	
	Daniel Ellis	
	Typed or printed came of signed	

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "RASMUSSEN MARINE, 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 EIGHTEENTH DAY OF DECEMBER, A.D. 2023.

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

at corn delaware gov/aut

Authentication: 204848699

Date: 12-18-23

To