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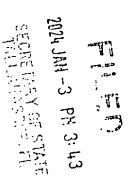
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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COVER LETTER

-a - 1

TO:	Registration Section Division of Corporations					
SUBJE	RaptorGuard LLC					
Name of Limited Liability Company						
		ility Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida				
Please	return all correspondence concerning this mat	tter to the following:				
	James Wilson					
		Name of Person				
	RaptorGuard LLC					
		Firm/Company				
	6846 S Canton Ave STE 776					
Address						
	Tulsa, OK 74136					
	City/State and Zip Code					
	kwilson@raptorguardllc.com					
	E-mail address: (to be used for future annual report notification)				
For fur	ther information concerning this matter, pleas	se call:				
James Wilson		813 3356476				
	Name of Contact Person	at () Area Code Daytime Telephone Number				
	Mailing Address: Registration Section	Street Address: Registration Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amou Please make check payable to: FLORIDA ☐ \$125.00 Filing Fee ☐ \$130.00 Filin Certific	DEPARTMENT OF STATE				

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

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

name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	ionda The	alternate name must include "Limited Liabi	hry Company," "L.L.C," or "LL	(· -
Oklahoma		3.	93-3369593		
(Jurisdiction under the law of wi	nich föreign limited hability company is organized)		(FEI number,	if applicable)	
October 9, 2023					
_	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration inc penalty) liability)		
6846 S Canton Ave ST			608 S 91st E Ave		
reet Address of Principal Office)			(Mailing Address)		
Tulsa, OK 74136			Tulsa, OK 74112		
				200	
			· · · · · · · · · · · · · · · · · · ·	2024 JAN SECRET	***
Name and street addres	s of Florida registered agent: (P.O. Box	NOT 8	(cceptable)		ri I
Name:	Registered Agents Inc			÷ /	•
Office Address:	7901 4th St N STE 300			PH 3: 43	
	St. Petersburg		33702		

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.

David Speris
(Registered agent's signature)

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: James Wilson	■Manager	Name: Keith Eidschun
■Member	Address: 608 S 91st E Ave	□Member	Address: 5095 113th Ave N
□Authorized	Tulsa. OK 74112	□Authorized	Clearwater, FL 33760
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□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.

James Wilson

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>RAPTORGUARD LLC</u> whose registered agent is <u>MORREL LAW PLLC</u>, with its registered office at <u>6846 S CANTON AVE STE 777</u> <u>TULSA 74136 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>27th</u>, day of <u>December</u>, <u>2023</u>.

Secretary Of State