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.

(((H240000770743)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

**diber the email address for this business entity to be used for the email address please.*

**Green the email address for this business entity to be used for the email address please.*

Exemail Address:

Foreign Limited Liability Company RYAHS PROPERTIES LLC

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

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA.

I. RYAHS PROPERTIES	FLC						
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability Compa	ay," "L.L.C." or "LLC.")"				
II name unavailable, enter alternate	name adopted for the purpose of transacting business in I	lorida. The alternate r	name must include "Limited Lia	bility Company,"	"L.l. C.")	or "LLC.")	
2. He Chinsdiction under the law of which foreign funited hability company is organized)		3. 88-3841776					
(furisdiction under the law of which foreign lumbed hability company is organized)			tFEI numbe	er, if applicable)		_	
4	Date first transacted basiness in Florida, 12 puro in Ose sections 605 (000) A 505 (000) E S. In determ		******				
	(Cate first transacted bispiness in Florida, 1) pino in (See sections 602 (0001 & 608 (0005, E.S. In determ	registration 1 me penalty hability)					
7901 4th St N STE 300 5.		7901 4	th St N STE 300				
Street Address of Principal Office)			iniling Address)				
St. Petersburg FL 33702		St. Pet	-:LII	2024			
				ALC:	<u> </u>	क्रम् हिंही	
				<u> </u>	827	(1000m)	
7. Name and street addres	ss of Florida registered agent; (P.O. Box	NOT accepta	ble)	55 <u>5</u> 55≘	PM		
				41 m	±. ⊐ह	Sana P	
Name:	Registered Agents Inc				20		
Office Address.	7901 4th St N STE 300						
	St. Petersburg		, Florida <mark>33702</mark>				
	(City)		(Zip code)				

Registered agent's acceptance:

Having been named as registered agent and to occept service of process for the above stated limited flability 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.

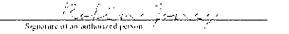
2/27/2024 10:04 08 PST, To 18506176383 Page: 3/4 Fax: 8134365206

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	Name:		□Manager	Name:
□Member			XMember	7901 4th St N STE 300 Address:
□Authorized			□Authorized	St. Petersburg FL 33702
Person			Person	
□Other	<u>_</u>	□Other	□Other	Other
□Manager	Name:		⊞Mimager	Name:
□Member	Address:		□Member	Address:
□Authorized	,	<u> </u>	□Authorized	····
Person	·		Person	
□Other		□Other	Other	□Other
∐Manager	Name:		i_!Manager	Name:
□Member	Address:		□Member	Address:
□Authorized			□Authorized	
Person	····		Person	······································
□Other		□Other	□Other	Other

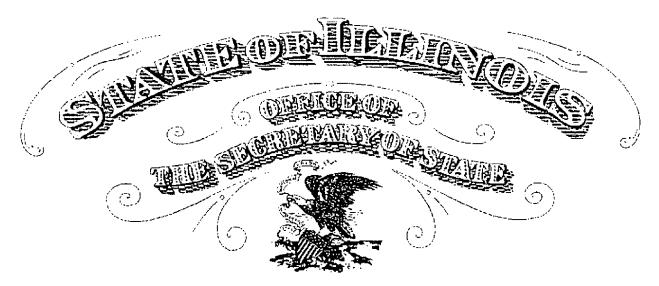
Important Nouce: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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.



File Number

1218813-7



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

Department of Business Services. I certify that

RYAHS PROPERTIES LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 26, 2022, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 27TH day of FEBRUARY A.D. 2024.