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APR 1 2 2024 к. Brumbley



CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Filone: 050-550-1500
ACCOUNT NO. : I2000000195
REFERENCE : 385555 8107500
AUTHORIZATION TRIBLES
COST LIMIT (: \$ 125
ORDER DATE : April 1, 2024
ORDER TIME : 9:42 AM
ORDER NO. : 385555-005
CUSTOMER NO: 8107500
FOREIGN FILINGS
NAME: DIGITAL MOTOR GROUP, LLC
XXXX_ QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Amanda Miller EXT#

EXAMINER: _____

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Date this transacted bisiness in Florida, if prior to registration.) (See sections 605.0904 & 605.0908, F.S. to determine penalty liability) 55 Northern Blvd Ste 55 Northern Blvd Ste 6. (Mailing Address) Ste 113 Apt 400 Grenvale, NY 11548 Hoboken, NJ 07030 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301	If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida, The a	alternate name must include "Limited Liabilit	y Company," "L.I.,C," or "LI.C,"
(Date this transacted bisiness in Florida, if prior to registration.) (See sections 605.0904 & 605.0908, F.S. to determine penalty liability) 55 Northern Blvd Ste 55 Northern Blvd Ste 6. (Mailing Address) Ste 113 Apt 400 Grenvale, NY 11548 Hoboken, NJ 07030 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301	1		1		
Ste 113 Ste 113 Apt 400 Grenvale, NY 11548 Hoboken, NJ 07030 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301	(Jurisdiction under the law of w	hich foreign limited liability company is organized)	5.	(FEI number, 11	applicable)
Ste 113 Ste 113 Apt 400 Grenvale, NY 11548 Hoboken, NJ 07030 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301					
Ste 113 Apt 400 Grenvale, NY 11548 Hoboken, NJ 07030 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301	•	(Date first transacted business in Florida, if prior to i (See sections 605.0904 & 605.0905, F.S. to determi	registration ne penalty	.) hability)	_
Ste 113 Grenvale, NY 11548 Hoboken, NJ 07030 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301		Э	6	1405 Adams st.	
Grenvale, NY 11548 Hoboken, NJ 07030 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301	treet Address of Principal Office)		0	(Mailing Address)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Tallahassee 32301	Ste 113			Apt 400	
Name: 1201 Hays Street Office Address: Tallahassee 32301	Grenvale, NY 11548		•	Hoboken, NJ 07030	
Name: 1201 Hays Street Office Address: Tallahassee 32301	. Name and street address	ss of Florida registered agent: (P.O. Box	<u>NOT</u> a	eceptable)	2024 AP?
Tallahassee 32301	Name:	Corporation Service Company		 _	
Tallahassee 32301	Office Address:	1201 Hays Street			1112: 2
		Tallahassee		32301 Florida	<u>.</u>
(City) (Zip code)		(City)		(Zip code)	_

(Registered agent's signature)

Ву:

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: Name: Tamatha Carbone □Manager □ Manager Name: ____ Address: __ 1405 Adams St, Apt 400 **■**Member □Member Address: _____ Hoboken, NJ 07030 ☐ Authorized □ Authorized Person Person Other Other _____ □ Other Other____ Nolan O'Brien □Manager Name: Address: ____ 50 Moore Rd **■**Member ☐ Member Address: ________ Bronxville, NY 10708 □ Authorized ☐ Authorized Person Person Other____ Other____ Other____ Other____ Name: _____ □Manager Name: _____ ☐ Manager Address: □Member □Member □ 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. Nonindexed 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. Tamatha Carbone Typed or printed name of signce

CSC 385555-5



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

DELAWARE, DO HEREBY CERTIFY "DIGITAL MOTOR GROUP, 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 FIRST DAY OF APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIGITAL MOTOR GROUP, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF AUGUST, A.D. 2016.

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

Authentication: 203151088

Date: 04-01-24