Florida Department of State Division of Como

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.

(((H24000134092 3)))



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To:

Division of Corporations

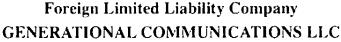
Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 : (888)462-3453 Fax Number : (877)919-2613

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please: **

Email Address: EFILE1234@INCFILE.COM

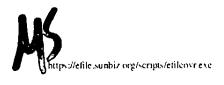


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COVER LETTER

(((H24000134092 3)))

TO: Registration Section Division of Corporations

SUBJECT: GENERATIONAL COMMUNICATIONS LLC Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

LOVETTE DOBSON		
	Name of Person	
	Firm/Company	
17350 STATE HWY 24		
	Address	
HOUSTON, TX 77064		
Cit	ty/State and Zip Code	
EFILE1234@INCFILE.Co	OM used for future annual report notification)	
For further information concerning this matter, please call	:	
LOVETTE DOBSON	at (1 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 DEP/ □ \$125.00 Filing Fee	& $\hfill \square$ \$155.00 Filing Fee & $\hfill \square$ \$160.00 Filing Fee, Certificate	

(((H24000134092 3)))

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

f name unavailable, enter alternate	name adopted for the purpose of transacting husiness in F	lorida. The alternate name must include "Eimited	Liability Company," "L.L.C." or	"LLC.")
Wyoming (Junsdiction under the law of w	hich (oreign limited liability company is organized)	3. <u>99-2424449</u>	nber, if applicable)	_
· <u></u>	(Date first transacted business in Florida, if prior to (See sections 605/0904 & 605/0905, E.S. to determ	registration.) ine penalty hability)		
3437 Andrew	/ Ave	6. 3437 Andrew A	Ave	_
Pensacola, Fl	32505	Pensacola, FL 3	32505	_
			(D	6
. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	7,000	-
Name:	REPUBLIC REGISTE	RED AGENT LLC	() () () () () () () () () ()	
Office Address:	1150 Nw 72nd Ave To	ower I Ste 455	AH 10: 47	**************************************
	Miami	Florida 33120	<u> </u>	
Registered agent's accep laving been named as re	tance: gistered agent and to accept service of p		l liability company at th	ther agre

(((H24000134092 3)))

Title or Capacity:	Name and Address:	Title or Capacity	Name and Address:
□Manager	Name: Starlon Moorman	□Manager	Name: Edward Turtle
⊗ Member	Address: 5830 E 2nd St	⊠Member	Address: 5830 E 2nd St
□Authorized	Ste 7000 #15309	□Authorized	Ste 7000 #15309
Person	Casper, WY 82609	Person	Casper, WY 82609
□Other		□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	VI 111 111 111 111 111 111 111 111 111 111 111 111 111 111 111
DOther		□Other	Other
⊡Manager	Name:	□Manager	Name.
□Member	Address:	□Member	Address:
T: Authorized		□Authorized	
Person		Person	
□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.

Staton Moor	man
Signature of an authorized per	SOIL
	/// !! 2/

Starlon Moorman

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STATE OF WYOMING Office of the Secretary of State

(((H24000134092 3)))

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

GENERATIONAL COMMUNICATIONS LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 10, 2024**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2024-001439982**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 12th day of April, 2024 at 9:44 AM. This certificate is assigned ID Number 071800518.

Secretary of State