

M 240000004921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2024 APR 16 AM 3:35

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2024

DEANNA RADKE
10620 TREENA ST., STE 160
SAN DIEGO, CA 92131 US

SUBJECT: REPEQUITY LLC
Ref. Number: W24000028890

We have received your document for REPEQUITY LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

STANTON H ROBERTS
Regulatory Specialist III

Letter Number: 624A00003773

RECEIVED

APR 16 2024

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RepEquity 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:

Deanna Radke

Name of Person

RepEquity LLC

Firm/Company

10620 Treena St., STE 160

Address

San Diego, CA 92131

City/State and Zip Code

dradke@req.co

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deanna Radke

858

945-8612

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. RepEquity LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "LLC.")

RepEquity LLC (REQ)
(If ~~an~~ ~~corporation~~, ~~other~~ ~~entity~~ ~~must~~ ~~adopted~~ for the purpose of transacting business in Florida. The ~~alternate~~ ~~name~~ ~~must~~ ~~include~~ "Limited Liability Company," "LLC," or "LLC.")

2. Delaware 3. 36-4815103
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(State first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 1140 3rd St NE 6. 2705 Dougherty Ferry Rd
(Street Address of Principal Office) (Mailing Address)

FL 2 STE 202
Washington, DC 20002 St. Louis, MO 63122

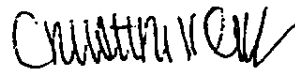
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation 33324
(City) , Florida (Zip code)

2024 APR 16 AM 3:35

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.



Christine Kelm
Assistant Secretary

(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:**

☒ Manager Name: Jeff Wolf

☐ Member Address: 2705 Dougherty Ferry Rd

☐ Authorized STE 202

Person St Louis, MO 63122

☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☒ Manager Name: Jeff Reynolds

☐ Member Address: 2705 Dougherty Ferry Rd

☐ Authorized STE 202

Person St Louis, MO 63122

☐ Other ☐ Other

☐ Manager Name: Deanna Radke

☐ Member Address: 10620 Treena St

☒ Authorized STE 160

Person San Diego, CA 92131

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ 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.


Signature of an authorized person

Deanna Radke

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "REPEQUITY, 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 TWENTY-SECOND DAY OF FEBRUARY, A.D. 2024.

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



5794050 8300

SR# 20240641551

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202867464

Date: 02-22-24