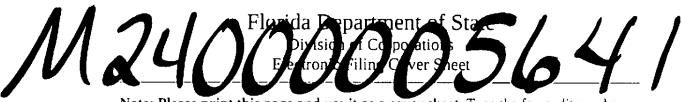
Division of Corporations



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.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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



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

Email Address:

Foreign Limited Liability Company By Dre LLC

Certificate of Status	0
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MAY - 3 2024

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Corporate Filing Menu

Help

J,

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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: By Dre LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "ELC.") If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LL C," or "LLC,") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) [Date first transacted business in Florida, if prior to registration.) (See sections 605-0904-& 605-0905, F.S. to determine penalty hability) 7901 4th St N STE 300 7901 4th St N STE 300 (Mailing Address) (Street Address of Principal Office) St. Petersburg, FL 33702 St. Petersburg, FL 33702 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc Name: 7901 4th St N STE 300 Office Address: , Florida 33702 St. Petersburg (City)

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.

Dink Reflects		
	(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: Austin, Andre	□Manager	Name:	
⊠Member	Address: 7901 4th St N STE 300	□Member	Address:	
□Authorized	St. Petersburg FL 33702	□Authorized		
Person		Person		28
Other	Other	Other	<u></u>	-2 T
□Manager	Name:	□Manager	Name:	سر مرین سر مرین
□Member	Address:	□Member	Address:	To F.
□ Authorized		□Authorized		<u> </u>
Person		Person		
Other	Other	□Other		□ Other
⊔Manager	Name:	∐Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
Other	Other	Other	<u>.</u>	□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.

Robin	Juney
	Signature of an authorized person
Robin Jones	
	Typed or printed name of signee

To: 18506176383 5/2/2024 11:39:35 PDT Page: 4/4 Fax: 8134365206

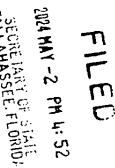
Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BY DRE 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-FIFTH DAY OF APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BY DRE LLC" WAS FORMED ON THE SIXTEENTH DAY OF APRIL, A.D. 2024.

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



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

3457791 8300 SR# 20241661876 Authentication: 203335253

Date: 04-25-24