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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of State	:us			
Special Instructions to Filing Officer:				





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SECRE LARY OF STATEMS

COVER LETTER

TO: Registration Section

Name	e of Limited Liability Company	
	Company for Authorization to Transact Business in Florida," Certil referenced foreign limited liability company to transact business in	
turn all correspondence concerning this matter to	o the following:	
Weston Curtis		
	Name of Person	
FM Services LLC		
	Firm/Company	
1047 S 100 W Ste 140		
	Address	
Logan, Utah 84321		
C	ity/State and Zip Code	
accounting@fox-marketingservices.com		
E-mail address: (to be	used for future annual report notification)	
er information concerning this matter, please cal	II:	
Weston Curtis	435 512-5541	
Name of Contact Person	at () Area Code Daytime Telephone Number	
Mailing Address: Registration Section	Street Address: Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		

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 HABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA;

name unavailable, enter alternate	name adopted for the purpose of transacting busine	ss in Florida. The altern	ate name must include "Limited Liability Cor	mpany," "L.L.C." or "LLC."
Delaware		3.		
(Jurisdiction under the law of w	thich foreign limited liability company is organized	ा	(FEI number, if appli	cable)
	(Date first transacted business in Florida, if J (See sections 605,0904 & 605,0905, F.S. to	orior to registration.) determine penalty liabili	ity)	
10 E. Fairfield Dr. Sui		104	7 S 100 W Ste 140	
et Address of Principal Office)		ο	(Mailing Address)	
Pensacola, FL, 32501		Log	an, Utah 84321	<u> </u>
""				24 VISI
				4 9
				<u> </u>
Name and street address Name:	ss of Florida registered agent: (P.O Registered Agents Inc	. Box <u>NOT</u> acce	piable)	24 APR 16 PM 4: 40
		. Box <u>NOT</u> acce	ptable)	N 15 PH 4: 40
Name:	Registered Agents Inc	. Box <u>NOT</u> acce	33702 Florida	N 15 PM 4: 40

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: Weston Curtis	□Manager	Name: Bryant White
□Member	Address: 1047 S 100 W Ste 140	■Member	Address:
□Authorized	Logan, Utah 84321	□Authorized	Logan, Utah 84321
Person		Person	
□Other	Other	□Other	□Other_
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□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.

Signature of an authorized person

Weston Curtis

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "FDS - PENSACOLA, FL LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR

REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY

AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE TWELFTH DAY OF JANUARY,
A.D. 2024, AT 4:38 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

Authentication: 203169795

Date: 04-03-24