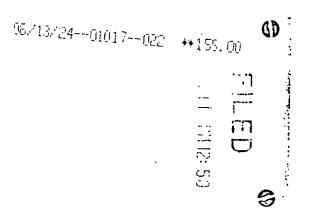
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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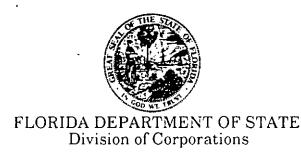


T. LETTUX

JUL 13 2024

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	HARD80 FREIGHT LLC				
00.00		f Limited Liability Company			
The end Existen	closed "Application by Foreign Limited Liability Conce, and check are submitted to register the above reference.	mpany for Authorization to Transact Business in Florida," Certificate of erenced foreign limited liability company to transact business in Florida.			
Please	return all correspondence concerning this matter to the	ne following:			
	MARIE ANNE CHAMPAGNE				
		Name of Person			
	HARD80 FREIGHT LLC				
		Firm/Company			
	511 E HARVARD ST UNIT 8				
		Address			
	GLENDALE, CA 91205				
	City/State and Zip Code				
	GALTAXIRP@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report notification)			
For fur	ther information concerning this matter, please call:				
	MARIE ANNE CHAMPAGNE	818 2448340 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 DEPA \$125.00 Filing Fee \$ Certificate of \$5	\$\$\ \begin{align*} \b			



June 18, 2024

MARIE ANNE CHAMPAGNE 511 E HARVARD ST UNIT 8 GLENDALE, CA 91205

SUBJECT: HARD80 FREIGHT LLC

Ref. Number: W24000092568

We have received your document for HARD80 FREIGHT LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 624A00013277

RECEIVED
JUL 1 2 2024

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:

Of some way with the some of the source of	name adopted for the purpose of transacting business in l	Placids The alternate name	must include "Limited Lishility	Company " "I I C " or "I I C ")	
	make soupled for the purpose of transacting sustriess in i	PIOTOR. THE WALLERS DESIGN	man merce comme commity	company, Edec, or one.	
OKLAHOMA 2	hich foreign limited liability company is organized)	3	(FEI number, if s		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI mimber, if a	ppiscable)	
05/23/2024					
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	o registration.)		-	
1222 NW 7TH ST		1222 NW			
5. (Street Address of Principal Office)		6. (Mailin	g Address)		
BOYNTON BEACH		BOYNTON BEACH			
FL 33426	FL 33426		FL 33426		
7. Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable))	<u> </u>	
Name:	MARIE ANNE CHAMPAGNE	· .		EIL PHIZE	
Office Address:	1222 NW 7TH ST			ED PH 12: 50	
	BOYNTON BEACH	, F)	33426 lorida	50 9 .	
	(City)	,	(Zip code)	_	

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.

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]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: MARIE ANNA CHAMPAGNE Name: ______ ☐ Manager ■ Manager Address: _ □Member Address: ______ **■** Member **BOYNTON BEACH, FL 33426** □ Authorized Authorized Person Person CEO □Other _____ Other Other □Other _ Name: _____ Name: □ Manager ■ Manager Address: ____ Address: □Member ☐ Member □ Authorized □ Authorized Person Person Other____ □Other____ □Other____ ☐ Other Name: _____ Name: ______ □Manager ■ Manager Address: 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. Signature of an authorized person MARIE ANNE CHAMPAGNE

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>HARD80 FREIGHT LLC</u> whose registered agent is <u>STEPHEN ROMONT HARDRIDGE</u>, with its registered office at <u>2400 NORTHWEST 30TH STREET 918 OKLAHOMA CITY 73112 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>8th</u>, day of <u>July, 2024</u>.

Secretary Of State