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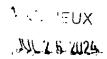
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## COVER LETTER

TO:

1-800-CANT-WORK LEGAL MARKETI ECT:	
Nam	ne of Limited Liability Company
nclosed "Application by Foreign Limited Liability nee, and check are submitted to register the above	Company for Authorization to Transact Business in Florida." Certific referenced foreign limited liability company to transact business in F
return all correspondence concerning this matter	to the following:
ERIC SHORE	
	Name of Person
1-800-CANT-WORK LEGAL MARK	KETING LLC
	Firm/Company
20 BRACE ROAD, SUITE 325	
<del> </del>	Address
CHERRY HILL, NJ 08034	
	City/State and Zip Code
EricS@ericshore.com	
E-mail address: (to b	e used for future annual report notification)
rther information concerning this matter, please ca	dl:
ERIC SHORE	267 980-7170
Name of Contact Person	at ()
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

# 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1-800-CANT-WORK LEGAL MARKETING LLC (Name of Fureign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (If name unavailable, enter alternate name adopted for the purpose of transacting husiness in Florida. The alternate name must include "Limited Liability Company," "L. L. C." or "LLC.") **NEW JERSEY** (FEI number, if applicable) (Junediction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 20 BRACE ROAD, SUITE 325 20 BRACE ROAD, SUITE 325 6. (Mailing Address) 5. (Street Address of Principal Office) CHERRY HILL, NJ 08034 CHERRY HILL, NJ 08034 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) MARK L. ROSEN Name: 200 S. ANDREWS AVE, SUITE 900

Registered agent's acceptance:

Office Address:

FORT LAUDERDALE

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 geen

\_, Florida \_

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: Name and Address: Title or Capacity: Name: KELLY SHORE ERIC SHORE □Manager 12 MANOR HOUSE COURT □Manager 12 MANOR HOUSE COURT **■** Member **■**Member CHERRY HILL, NJ 08003 CHERRY HILL, NJ 08003 Authorized □ Authorized Person Person □Other\_\_\_\_ Other\_\_\_\_ Other\_\_\_\_ Other\_\_\_\_\_ Name: □Manager Name: \_\_\_\_\_\_ □Manager Address: □Mcmber Address: □Member □ Authorized □ Authorized Person Person Other\_\_\_\_\_ Other\_\_\_\_ Other\_\_\_\_ □Other Name: \_\_\_\_\_\_ Name: \_\_\_\_\_ ☐ Manager Address: \_\_\_\_\_\_ □Member Address: □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. Non-

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

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information

Signature of an authorized person

indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

of the translator must be submitted)

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

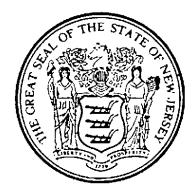
### 1-800-CANT-WORK LEGAL MARKETING, LLC 0600370321

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on February 18, 2011.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

JOAN DIGRAVIO 20 BRACE ROAD SUITE 325 CHERRY HILL, NJ 08034



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 12th day of July, 2024

Shep A Mun

Elizabeth Maher Muoio State Treasurer

Certificate Number : 6155218134

Verify this certificate online at