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To:

Division of Corporations

Fav Number : (850)617-6383

From:

Account Name : C I CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (614)573-3996 Fax Number

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

Email

Address: \_\_\_\_TAX@EXPRESS.COM\_

## Foreign Limited Liability Company PHOENIX Retail, LLC

Certificate of Status	()
Certified Copy	1
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Help

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

From: David Thomas

IN COMPLIANCE WITH SECTION (05/00), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. TIMITED HABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDAY L. PHOENIX Retail, LLC : Same of Foreign Limited Liability Company, must include Troutest Liability Company. [1,1,0] or [110,1] (If name anovalable enter alternate name adopted for the purpose of transacting business in clouds. The alternate mane must include "I mated Enablity Company. (2. L.C., or "FEC.)

Delaware  Thirshetion under the law or which tereign limited hability company is occurred.	3. 99-3094458 (EFF number, d'applicable)
Upon Qualification  Our first transacted business in Herida of pairs to observe sections out 5 0001 & 605 0005, U.S. 6. Jane 6	occinitation (
1 Express District Address of Principal Officer	6. 1 Express Dr (Mailing Address)
Columbus, OH 43230	Columbus, OH 43230

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

Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida -	33324 (Zip code)

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.

CT Corporation System

By: SEAN L EMERICK ASSISTANT SECNETARY S. 000

(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 (b) total):

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
⊠Manager	Name: Mark Still	_ Manager	Name: PHOENX Retail Holdings ILC
□Member	Address: 1 Express Dr	₹ Member	Address: 1 Express Dr
□Authorized	Columbus, OH 43230	☐ Authorized	Columbus, Ol1 43230
Person		Person	
□Other	_ Other	_ Other	
■Manager	Name: Kevin Meme	≟ Manager	Name:
□Member	Address: 1 Express Dr	∏Member	Address:
□Authorized	Columbus, ()11 43230	= Authorized	
Person		Person	
□Other		Other	(Other
□Manager	Name:	☐ Manager	Name:
□Member	Address:	□ Member	Address:
□Authorized		_ Authorized	
Person		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.

/s/ Mark Still	
	Negrature of an authorized person
Mark Still, Manager	
·	found a promoder and a contract



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

DELAWARE, DO HEREBY CERTIFY "PHOENIX RETAIL, 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 THIRTY-FIRST DAY OF JULY, A.D. 2024.

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



Serling W. Bullinch. Seccedary of State

Authentication: 204053152