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COVER LETTER

TO:

O:	Registration Section Division of Corporations					
URJE	Inspire the Calm LLC					
., .,,,,	Name of Limited Liability Company					
he en xister	closed "Application by Foreign Limited Liabilit nee, and check are submitted to register the abov	ty Company for Authorization to Transact Business in Florida," Certificative referenced foreign limited liability company to transact business in Flo				
ease	return all correspondence concerning this matte	r to the following:				
	Stan Byrd					
		Name of Person				
	Inspire the Calm LLC					
		Firm/Company				
	1824 NE Woodview LN	<i>;</i>				
		Address				
	Lee's Summit, MO 64086					
		City/State and Zip Code				
	stan_byrd@hotmail.com					
	E-mail address: (to	be used for future annual report notification)				
or fur	ther information concerning this matter, please	call:				
Stan Byrd		816 304-9814 at ()				
	Name of Contact Person	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 Please make check payable to: FLORIDA D □ \$125.00 Filing Fee □ \$130.00 Filing Certificat	EPARTMENT OF STATE				



August 14, 2024

STAN BYRD 1824 NE WOODVIEW LN LEE'S SUMMIT, MO 64086

SUBJECT: INSPIRE THE CALM LLC

Ref. Number: W24000114489

We have received your document for INSPIRE THE CALM LLC and your check(s) totaling \$160.00. 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.

Letter Number: 524A00018098

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

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

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Inspire the Calm LLC						
(Name of Foreign Limit	ted Liability Company; must include "I	imited Liability	Company," "L.L.C.," or "LLC.")		-	
(if name unavailable, enter alternate name	adopted for the purpose of transacting busine	ess in Florida. The	alternate name must include "Limited Li	iability Company,"	"l. l. C."	or "LLC."
Missouri 2. (Jurisdiction under the law of which foreign limited liability company is organized)		3.	99-3442783 3. (FET number, if applicable)			
(Jurisdiction under the law of which I	oceilan junited frapijitý, combruž iz odlaurzed	1)	(FEI nume	er, it applicante)		
n/a 4						
	(Date first transacted business in Florida, if p (See sections 605,0904 & 605,0905, F.S. to	arior to registration determine penalty	r.) Tiability)			
1824 NE Woodview LN 5. (Street Address of Principal Office)		6.	1824 NE Woodview LN (Mailing Address)			
Lees Summit, MO 64086			Lees Summit, MO 64086			
				<i>S</i>	2024 /	
7. Name and street address of	Florida registered agent: (P.O	. Box <u>NOT</u> :	acceptable)	: 1	AUG 20 P	
Name: L	inda Griffin			E STATE) PM 12: 34	O
Office Address:	702 20th.	St		Ħ	+	
_	Port St. J	ioe	. Florida 324	<u>56</u>		

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.

(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: Stan Byrd	≣Manager	Name: Ed Gonzales
■Member	Address: 1824 NE Woodview LN	■Member	Address:
Authorized	Lee's Summit, MO 64086-7816	■Authorized	Lec's Summit, MO 64086-3312
Person	CEO	Person	СМО
□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	□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

Stan Byrd

Typed or printed name of signee

. . .

STATE OF MISSOURY



John R. Ashcroft Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

INSPIRE THE CALM LLC LC014555620

was created under the laws of this State on the 10th day of June, 2024, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 16th day of August, 2024.

Secretary of State

THE SHEET OF SHEET SHEET

Certification Number: CERT-08162024-0009