

M24000013264

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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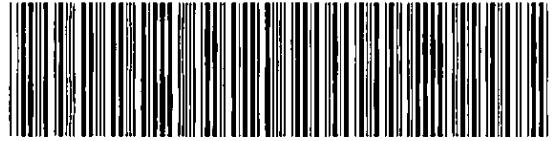
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED-4 10/11/24

10/11/24

COVER LETTER

TO: Registration Section
Division of Corporations
Anagen LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Andrew Verbinnen

Name of Person

Anagen LLC

Firm/Company

271 Southland Road

Address

Palm Beach, FL 33480

City/State and Zip Code

bakst@hairdao.xyz

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Bakst	1	9172046427
_____	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 DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**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:*

Anagen LLC

1. _____
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC")
Delaware

2. _____ 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

271 Southland Road

271 Southland Road

5. _____
(Street Address of Principal Office)

Palm Beach, FL 33480

6. _____
(Mailing Address)

Palm Beach, FL 33480

USA

USA

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

Andrew Verbinnen

Name:

271 Southland Road

Office Address:

Palm Beach

33480

_____, Florida _____
(City) (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.

DocuSigned by:

Andrew Verbinnen

607694297606620 (agent's signature)

2024 OCT -6 AM 11: 02

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:** _____
 _____ Hair Inc.
☐ Manager Name: _____
 _____ 271 Southland Road
☒ Member Address: _____
 _____ Palm Beach, FL 33480
☐ Authorized _____
 _____ Person _____
☐ Other _____ ☐ Other _____

Title or Capacity: _____ **Name and Address:** _____
 _____ Andrew Bakst
☐ Manager Name: _____
 _____ 92 Laight St Apt 10B
☐ Member Address: _____
 _____ New York, NY 10013
☒ Authorized _____
 _____ Person _____
☐ Other _____ ☐ Other _____

_____ Andrew verbinnen
☐ Manager Name: _____
 _____ 271 Southland Road
☐ Member Address: _____
 _____ Palm Beach, FL 33480
☒ Authorized _____
 _____ Person _____
☐ Other _____ ☐ Other _____

_____ Name: _____
☐ Manager Name: _____
 _____ Address: _____
☐ Member Address: _____
☐ Authorized _____
 _____ Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
 _____ Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
 _____ 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.

DocuSigned by:

 60DBB513100B4F2 Signature of an authorized person
 Andrew Bakst

 Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANAGEN 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 TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANAGEN LLC" WAS FORMED ON THE SEVENTH DAY OF MAY, A.D. 2024.

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



3614804 8300

SR# 20243791725

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204488919

Date: 09-26-24