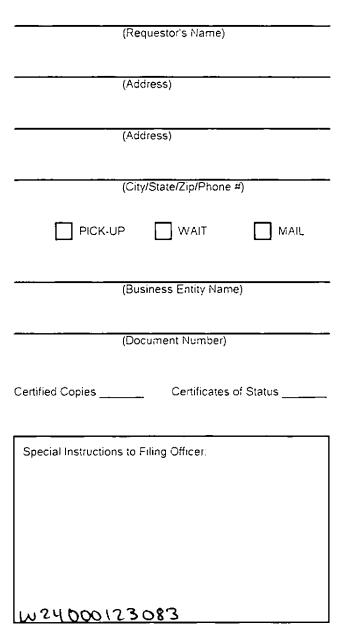
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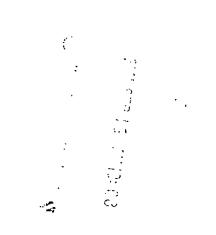
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COVER LETTER

O: Registration Section Division of Corporations
UBJECT: 1744 Pratt Highway LLC Name of Limited Liability Company
he enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of xistence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
lease return all correspondence concerning this matter to the following:
Jonathan Pergerson Name of Person
Firm/Company
4152 Independence Ct STE C5 Address
Sarasota, FL 34234 City/State and Zip Code
Office a flota (al, com Li-mail address: (to be used for future annual report notification)
Jonathan Pergerson at (73) 88-0031 Name of Contact Person Area Code Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810 Tallahassec, FL 32303
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\Begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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:
1. Pratt Highlay LL (Name of Foreign Limited Liability Company; must include [Limited Liability Company,""L.L.C.," or "LLC.")
(If name unavailable, onter alternate name adopted for the purpose of dansacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")
(If name unavailable, offer afternate name adopted for the purpose or managements in Florida. The afternate name must themse Limited L
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. No prior transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1006 E Pager LN 6. 617 Smaro LN (Street Address of Principal Office)
STE 111
Austin, TX 78753 Austin, TX 78749
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Flotacal
Office Address: 4152 Independence Ct Ste C5
Sanasota, Florida 34234 (City)
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.
(Registration of the state of t

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage fun to six (6) totall:

Title or Capacity:	Name and Address:	Title or Capacity	: Name and Address:
Manager	Name: Lap Q Le	Manager	Name: NAMU H LE
□Member	Address: 6/17 Junano LN	□Member	Address: 6/17 Junioro L
□Authorized	Austin, TX 78749	□Authorized	Austin, TX 7874
Person		Person	
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

- 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.

l (x/e	
Signature of an authorized person	
Lap Q Le Typed or printed name of signee	_

. .

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for 1744 PRATT HIGHWAY LLC (file number 805579748), a Domestic Limited Liability Company (LLC), was filed in this office on June 07, 2024.

It is further certified that the entity status in Texas is in existence.

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In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 16, 2024.



Phone, (512) 463-5555

Prepared by: SOS-WEB

Jane Melson

Jane Nelson Secretary of State