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

IN COMPLANCE WITH SECTION MISION: FUORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER & FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT IN SINTED STATE OF FLORIDA

, MUS CONSULTING LLC

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SEMINOLE, FL 33777 SEMINOLE, FL 33777	9927 KEY HAVEN F	D.				
	(Street Address of	Principal (Frice)	ָרָה	(Multing Assire		—
Name and <u>street address</u> of Florida registered agent: (P.O. Box. <u>NOT</u> acceptable)	SEMINOLE, FL 3377	7	SEMD	NOLE, FL, 33777		
Name and street address of Florida registered agent: (P.O. Box. <u>NOT</u> acceptable)						
TAE Y KIM	Name and street addre	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptal	ple;		—
	Name:	ТАЕ Ү КІМ			24 NOV -	-
9927 KEY HAVEN RD		9927 KEY HAVEN RD			AM	
SEMINOLE 33777	Office Address:					

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 und complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

ik agistered and a sugnature

3 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:
[_]Martager	Name: TAE Y KIM	📄 Manager	Name:	
🖪 Member	Address;	[] Meinber	Address:	
Authorized	9927 KEY HAMEN RD	[]] Authorized		
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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 \$.817.155, F.S.

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	Signaters, of the Setherized person
TAE Y KIM, MEMBER	'
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STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY. Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:	VIUS CONSULTING LLC
DOS ID Number:	4939320
Entity Type:	DOMESTIC LIMITED LIABILITY COMPANY
Entity Status:	ENISTING
Date of Initial Filing with DOS:	05/02/2016
Statement Status:	CURRENT
Statement Due Date:	05/31/2026

No information is available from this office regarding the financial condition, business activity or practices of this entity,



WITNESS my hand and official seal of the Department of State, at the City of Albany, on November 01, 2024 at 09:57 A.M.

WALTER T. MOSLEY Secretary of State

Brandon C. Hughan

BRENDAN C. HUGHES Executive Deputy Secretary of State

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