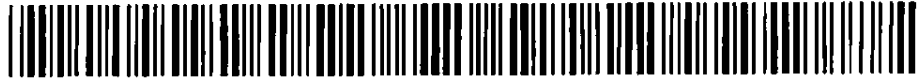


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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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

Email Address: _____

**Foreign Limited Liability Company
LENDMARX, LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 05 |
| Estimated Charge | \$155.00 |

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COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: LENDMARX, LLC

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:

W. Ashby Underhill

Name of Person

Coquina Law Group

Firm/Company

825 Ballough Rd, Suite 410

Address

Daytona Beach, FL 32114

City/State and Zip Code

Ashby@CoquinaLawGroup.com

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

For further information concerning this matter, please call:

Ashby Underhill

386

675-1300

Name of Contact Person

at ()

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

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

(If none 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.")

2. Nevada
(Jurisdiction under the law of which foreign limited liability company is registered)

3. _____
(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)

5. Preferred Data, LLC
(Street Address or Principal Office)

6. Grenway Properties, LLC
(Mailing Address)

701 Market Street, Ste 111

110 South Johnson

St. Augustine, FL 32095

Woodstock, IL 60098

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


Name: W. Ashby Underhill

Office Address: 825 Ballough Rd, Ste. 410

Daytona Beach, Florida 32114
(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.


(Registered agent's signature)

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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:
☒ **Manager** Name: Preferred Data LLC
☐ **Member** Address: 701 Market Street, Ste 111
☐ **Authorized** St. Augustine, FL 32095
Person
☐ **Other** ☐ **Other**

Title or Capacity: Name and Address:
☒ **Manager** Name: Grenway Properties, LLC
☐ **Member** Address: 110 South Johnson
☐ **Authorized** Woodstock, IL 60098
Person
☐ **Other** ☐ **Other**

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

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

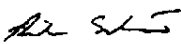
☐ **Manager** Name: _____
☐ **Member** Address: _____
☐ **Authorized** _____
Person
☐ **Other** ☐ **Other**

☐ **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.



Signature of an authorized person

Richard Scolio, Manager Grenway Properties, LLC

Typed or printed name of signee

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SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence **LENDMARX, LLC** as a DOMESTIC LIMITED-LIABILITY COMPANY (86) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 12/02/2017, and in good standing in this State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of this State, at my office on 11/08/2024.

FV Aguilar

FRANCISCO V. AGUILAR
Secretary of State



Certificate Number: B202411085174313

You may verify this certificate

online at <https://www.nvsilverflume.gov/home>

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