Division of Corporations

# Florida Department of State

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Division of Corporations

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From:

Account Name : LEGALZOOM.COM INC.

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Clearview Acce	ss LLC
Certificate of Status	0
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\$155.00

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COVER LETTER

From: Melania Ibarra

	Registration Section Division of Corporati	ons			
SUBJEC	Clearview Access	LLC			
ACTION A		Name of Limited Liability Company			
The enclo Existence	osed "Application by F e, and check are submit	oreign Limited Liability Compa ited to register the above referen	ny for Authoriza ced foreign limi	ation to Transact Business in Florida," Certified liability company to transact business in	ficate of Florida.
Please re	turn all correspondence	e concerning this matter to the fo	ollowing:		
	Mike Town				
		Nan	ne of Person		
	Legalzoom.co	om. Inc.	1		
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	9900 Spectru	m Dr			
Address					
	Austin, TX 7	8717			
		City/Sta	te and Zip Code		
	brad_ty1678@	yahoo.com			
		E-mail address: (to be used	for future annua	report notification)	
For furthe	er information concern	ing this matter, please call:			
	Mike Town		800 at (	773-0888	
,	Name	of Contact Person	Area Code	Daytime Telephone Number	
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	ns		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	Enclosed is a check for Please make check pay	r the following amount: rable to: FLORIDA DEPARTS	IENT OF STA	TE	
	S125.00 Filing Fee	_	<b>S</b> 155.00	Filing Fee & S160.00 Filing Fee, C of Status & Certified 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: Clearview Access LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.E.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 "L.L.C." Техаз 88-0898711 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605/0904 & 605/0902, r/S) to determine penalty liability) 101 Rambow Dr 101 Rainbow Dr (Street Address of Pimeipal Office) (Mailing Address) Livingston, Texas 77351 Livingston, Texas 77351 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) UNITED STATES CORPORATION AGENTS, INC. Name: 476 Riverside Ave. Office Address: Jacksonville

#### 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 um familiar with and accept the obligations of my position as registered agent.

Crik Treutlein	
Caro i accurati	

ERIK TREUTLEIN, ASSISTANT SECRETARY, UNITED STATES CORPORATION AGENTS, INC.

8. For initial indexing purmanage [up to six (6) total	For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to age [up to six (6) total]:			
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:	
_	Bradley Tye		Thomas James Cannon	

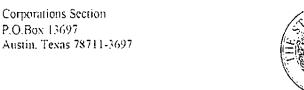
Title or Capacity.	ivanic and Audiess.	title of Capacity.	THE GIVE PROPERTY.
Manager	Name: Bradley Tye	Manager Manager	Name: Thomas James Cannon
Member	Address:	■ Member	Address: 101 Rainbow Di
Authorized	Livingston, Texas 77351	☐ Authorized	Livingston, Texas 77351
Person		Person	
Other	Other	Other	Other
_			
Manager	Name:	Manager 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.

/S/Bradley Tye	
<del></del>	Signature of an authorized person
Bradley Tye	
	Lyped or printed name of senses

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 Clearview Access LLC (file number 804434966), a Domestic Limited Liability Company (LLC), was filed in this office on February 16, 2022.

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

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 November 29, 2024.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Jane Nelson Secretary of State

Dial: 7-1-1 for Relay Services

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