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TO:	Registration Section Division of Corporations	•			
SUBJI	1541 Retail LLC ECT:				
OC DE		Name of Limited Liability Company			
		d Liability Company for Authorization to Transact Business in Florida." Certificate the above referenced foreign limited liability company to transact business in Flor			
Please	return all correspondence concerning	his matter to the following:			
	Brandon Keith Hallmark,	Paralegal			
		Name of Person			
Thompson Hine LLP					
	Firm/Company				
	1919 M Street, NW, Suite	700			
	Address				
City/State and Zip Code					
bryan@1541retail.com; brandon.hallmark@thompsonhine.com					
	E-mail ad	dress: (to be used for future annual report notification)			
For fur	ther information concerning this matte	r, please call:			
	Brandon Keith Hallmark, Paralegal	202 973-2767 at ()			
	Name of Contact P				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	☐ \$125.00 Filing Fee	g amount: RIDA DEPARTMENT OF STATE 00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida. The a	alternate name must include "Limited Liab	ility Company," "L.L_C."	o: "l.
South Carolina		3	33-4391201		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	٥.	(FEI number	, if applicable)	
N/A					
	(Date first transacted business in Florida, if prior to 1See sections 605,0904 & 605,0905, F.S. to determi	registration ne penalty	i.) Hability)	_	
1590 Executive Avenue		6	1590 Executive Avenue		
eet Address of Principal Office)		0.	(Mailing Address)		
Myrtle Beach, South C	arolina 29577		Myrtle Beach, South Carolina	1 29577	
Name and street address	s of Florida registered agent: (P.O. Box	NOT 9	accentable)	. .	
Name and street address Name:	Corporation Service Company	<u>NOT</u> a	acceptable)	2020 JUN 3	
		NOT_a	acceptable)	ZUZU JUN 30 PN	
Name:	Corporation Service Company	NOT a	acceptable) 32301 , Florida	2020 JUN 30 PH 4: 25	

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.

Skulda J. Snook, Assistant Secretary

(Registered agent's signature)

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: Title or Capacity: Name and Address: Name: Bryan W. Catalano Thomas Mike Hendrix □Manager **■** Manager Address: ____ Address: 1590 Executive Avenue **■** Member ☐ Member Myrtle Beach, South Carolina 29577 Myrtle Beach, South Carolina 29577 □ Authorized ☐ Authorized Person Person □Other □Other____ Other_ □Other □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. Nonindexed 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. T. Mike Hendrix

Typed or printed name of signee

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

1541 Retail LLC, a limited liability company duly organized under the laws of the State of South Carolina on April 2nd, 2025, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 24th day of June, 2025.

Mark Hammond, Secretary of State