

M25000010652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

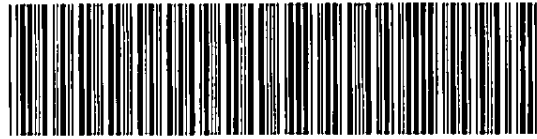
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUL 29 2025

K. Brumbley

MS

CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 07/29/2025
Acc#I20160000072

mic SW

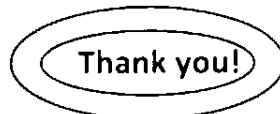
Name:	Novus International Holdings, L.L.C.
Document #:	
Order #:	16448797

Certified Copy of Arts & Amend:	☐		
Plain Copy:	☐		
Certificate of Good Standing:	☐		
Certified Copy of	☐		
Apostille/Notarial Certification:	☐	Country of Destination:	
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	Plain: ☐	
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Amount: \$ **155.00**



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NOVUS INTERNATIONAL HOLDINGS, L.L.C.

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:

KRISTIN RYAN

Name of Person

NOVUS INTERNATIONAL, INC.

Firm/Company

17988 EDISON AVENUE

Address

CHESTERFIELD, MO 63005

City/State and Zip Code

KRISTIN.RYAN@NOVUSINT.COM

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

For further information concerning this matter, please call:

KRISTIN RYAN

314

4537784

at ()

Name of Contact Person

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

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. NOVUS INTERNATIONAL HOLDINGS, L.L.C.

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

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 43-1889356

(FLL 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. 17988 EDISON AVENUE

(Street Address of Principal Office)

6. (Mailing Address)

CHESTERFIELD, MO 63005

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida

33324

(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.

C T Corporation System

By:

(Registered agent's signature)

Stephanie Hencz

Stephanie Hencz, Assistant Secretary

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2025 JUL 29 PM 3:26
CLERK OF CIRCUIT COURT
IN AND FOR
THE COUNTY OF DADE
FLORIDA

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: Novus International, Inc.

☒ Member Address: 17988 Edison Avenue

☐ Authorized Chesterfield, MO 63005

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: David Dowell

☐ Member Address: 17988 Edison Avenue

☒ Authorized Chesterfield, MO 63005

Person _____

☒ Other Vice President ☐ Other _____

☐ Manager Name: Kevin Lux

☐ Member Address: 17988 Edison Avenue

☒ Authorized Chesterfield, MO 63005

Person _____

☒ Other Secretary ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Daniel Meagher

☐ Member Address: 17988 Edison Avenue

☒ Authorized Chesterfield, MO 63005

Person _____

☒ Other President ☐ Other _____

☐ Manager Name: Ryan Shirley

☐ Member Address: 17988 Edison Avenue

☒ Authorized Chesterfield, MO 63005

Person _____

☒ Other Treasurer ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

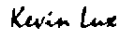
Person _____

☐ 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.

DocuSigned by:

 096ED6020400497...

 Signature of an authorized person

Kevin Lux

 Typed or printed name of signer

Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOVUS INTERNATIONAL HOLDINGS, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF JULY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



3150258 8300

SR# 20253492790

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, reading "C. B. Sanchez", written over a horizontal line.

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 204316614

Date: 07-28-25