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### COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT:	E	co Friendly Services LLC		
Sommer:	Name	of Limited Liability Company	_	
The enclosed "Applic Existence, and check	cation by Foreign Limited Liability C are submitted to register the above re	Company for Authorization to Transact Business in Florida eferenced foreign limited liability company to transact bus	." Certification in El	ate of lorida.
Please return all corre	espondence concerning this matter to	the following:		
		Matthew J. Fira	_	
<del></del>		Name of Person	_	
Eco-Friendly Systems				
Firm/Company				
903 Leola Ln				
Address				
Allen, Tx 75013				
	Ci	ity/State and Zip Code	_	
	M	fira@eco-friendlysystems.com	-	
	E-mail address: (to be	used for future annual report notification)	p	
For further informati	on concerning this matter, please cal	1:	2821 0CT 12	; ;
M	atthew Fira	at ( 214 ) 236-6767	112	g to th
	Name of Contact Person	Area Code Daytime Telephone Number	5	1
Mailing Ad Registration	dress: on Section	Street Address: Registration Section	PN 2: 15	أسد
	of Corporations	Division of Corporations	S)	
P.O. Box		The Centre of Tallahassee		
Tallahasse	ee, Fl. 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	a check for the following amount: e check payable to: <b>FLORIDA DEP</b> Filing Fee <b>X</b> \$130.00 Filing Fee Certificate o	2 & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee		

## 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: Eco Friendly Services, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.U.C.," or "LU.C.") (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,") (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 0905, F.S. to determine penalty liability). 903 Leola Ln Allen, Tx 75013 903 Leola Ln Allen, Tx 75013 (Street Address of Principal Office) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Matthew Fira Name: 1003 E Call Office Address: Tallahassee \_\_\_\_\_, Florida \_ (City) 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)

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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Name: Matthew Fira Name: \_\_\_\_\_ □Manager Address: □Member □ Authorized ☐ Authorized Person Person □Other\_\_\_\_\_ □Other \_\_\_\_ Name: \_ Carl Fira **X** Manager □Manager Name: \_\_\_\_\_ Address: 1120 Circle J trail ☐Member ■ Member Address: Prosper, TX 75078 □ Authorized □ Authorized Person Person □Other □Other □Other\_\_\_\_ □Other Name: Chad Greg □Manager Name: (XManager Address: 1003 E Call □Member □Member Address: Tallahassee, Fl 32301 □ Authorized ☐ Authorized Person Person □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. Signature of an authorized person

Matthew Fira

Typed or printed name of signer

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jose A. Esparza Deputy Secretary of State

## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Eco Friendly Services, LLC (file number 803279694), a Domestic Limited Liability Company (LLC), was filed in this office on April 01, 2019.

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 October 12, 2021.

Phone: (512) 463-5555

Prepared by: SOS-WEB

Jose A. Esparza Deputy Secretary of State

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 1085604260005