

M22000017602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

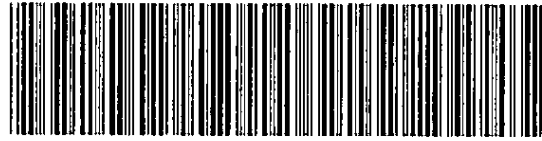
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700414353747

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE LAW
2023 SEP -8 PM 12:40

RECEIVED
2023 SEP 8 9:13:13
TALLAHASSEE, FLORIDA
R. HUNT
09/08/23



115 N CALHOUN ST., STE. 4
 TALLAHASSEE, FL 32301
 P: 866.625.0838
 F: 866.625.0839
 COGENCYGLOBAL.COM

Account#: I20000000088

Date: 09/08/2023

Name: KEN

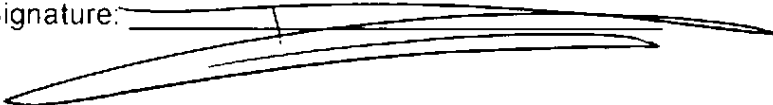
Reference #: 2114529

Entity Name: INNOVATION REFUNDS EMPLOYEE, LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other ** GOOD STANDING UPON FILING **

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 CLERK OF STATE
 DIVISION OF CORPORATIONS
 2023 SEP -8 PM 12:40

Authorized Amount: \$30.00

Signature: 

CORPORATE HQ
 COGENCY GLOBAL INC.
 10 E 40TH ST, 10TH FL
 NY, NY 10016
 D: +1.212.947.7200
 P: 800.221.0102
 F: 800.944.6607

EUROPEAN HQ
 COGENCY GLOBAL (UK) LIMITED
 REGISTERED IN ENGLAND & WALES,
 REGISTRY #8010712
 6 LLOYDS AVE, UNIT 4CL
 LONDON EC3N 3AX
 +44 (0)20.3961.3080

ASIA PACIFIC HQ
 COGENCY GLOBAL (HK) LIMITED
 A HONG KONG LIMITED COMPANY
 UNIT B, 1/F, LIPPO LEIGHTON TOWER
 103 LEIGHTON RD, CAUSEWAY BAY
 HONG KONG
 P: +852.2682.9633
 F: +852.2682.9790

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Innovation Refunds Employee, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Anapoell

Name of Person

IR Labs DE, LLC

Firm/Company

4350 Westown Parkway, Suite 300

Address

West Des Moines, IA 50266

City/State and Zip Code

kanapoell@innovationrefunds.com

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

For further information concerning this matter, please call:

Karen Anapoell at (949) 730 8552

Name of 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:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

2023 SEP - 8 PM 12:40
STATE OF FLORIDA
DIVISION OF CORPORATIONS

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: INNOVATION REFUNDS EMPLOYEE, LLC

Enter new principal office address, if applicable: _____

*(Principal office address
MUST BE A STREET ADDRESS)* _____

Enter new mailing address, if applicable: _____

*(Mailing address
MAY BE A POST OFFICE BOX)* _____

2. The Florida document number of this limited liability company is: M22000017602

3. Jurisdiction of its organization: California

4. Date authorized to do business in Florida: November 22, 2022

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: IR Labs DE, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Cogency Global Inc.

New Registered Office Address: 115 N CALHOUN ST STE. 4

Enter Florida Street Address

TALLAHASSEE, Florida 32301

City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

/s/ Ken Howell, Asst. Secretary

If Changing Registered Agent, Signature of New Registered Agent

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2023 SEP - 8 PM 12:40

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Delaware

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Howard Makler

Signature of the authorized representative

Howard Makler, President

Typed or printed name of signee

Filing Fee: \$25.00

2008 SEP - 8 PM 12: 10
DIVISION OF CORPORATIONS
SECRETARY OF STATE



California Secretary of State

Business Programs Division
1500 11th Street, Sacramento, CA 95814

Request Type: Certified Copies
Entity Name: IR LABS, LLC
Formed In: CALIFORNIA
Entity No.: 202200310211
Entity Type: Limited Liability Company - CA

Issuance Date: 09/06/2023
Copies Requested: 1
Receipt No.: 005078051
Certificate No.: 143106623

Document Listing

Reference #	Date Filed	Filing Description	Number of Pages
36255394-1	01/01/2022	Initial Filing	1
B1309-9404	12/30/2022	Amendment	1
B1905-4996	07/25/2023	Conversion to Nonqualified Entity	1
.. ***** End of list *****			

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, do hereby certify on the Issuance Date, the attached document(s) referenced above are true and correct copies and were filed in this office on the date(s) indicated above.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California on September 06, 2023.



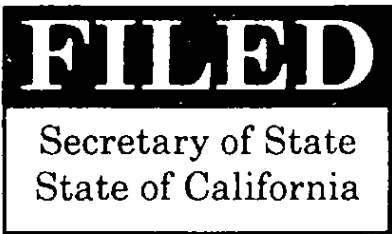
SHIRLEY N. WEBER, PH.D.
Secretary of State

2023 SEP -8 PM 12:40
DIVISION OF CORPORATIONS
SECRETARY OF STATE

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.



California Secretary of State
Electronic Filing



LLC Registration – Articles of Organization

Entity Name: Innovation Refunds Employee LLC

Entity (File) Number: 202200310211
File Date: 01/01/2022
Entity Type: Domestic LLC
Jurisdiction: California

Detailed Filing Information

- 1. Entity Name: Innovation Refunds Employee LLC
 - 2. Business Addresses:
 - a. Initial Street Address of Designated Office in California: 751 Bolsana
Laguna Beach, California 92651
United States
 - b. Initial Mailing Address: 751 Bolsana
Laguna Beach, California 92651
United States
 - 3. Agent for Service of Process: Howard Makler
751 Bolsana
Laguna Beach California 92651
United States
 - 4. Management Structure: All LLC Member(s)
 - 5. Purpose Statement: The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.
- Future File Date Of: January 01, 2022
Electronic Signature:
The organizer affirms the information contained herein is true and correct.
Organizer: Tara L Elkin

2023 SEP - 8 PM 12: 40
DIVISION OF CORPORATIONS
SECRETARY OF STATE

Certificate Verification No.: 1431066623 Date: 09/06/2023



Secretary of State
Amendment to Articles of
Organization of a
Limited Liability Company (LLC)

LLC-2



For Office Use Only

-FILED-

File No.: BA20230044777
Date Filed: 12/30/2022

Filing Fee - \$30.00

Certification Fee (Optional) - \$5.00

Note: You must file a Statement of Information (Form LLC-12), to change the business address(es) of the LLC or to change the name or address of the LLC's manager(s) and/or agent for service of process, which can be filed online at fileOnline.sos.ca.gov

Above Space For Office Use Only

1. LLC Exact Name (Enter the exact name on file with the California Secretary of State.)

INNOVATION REFUNDS EMPLOYEE LLC

2. LLC Entity (File) Number (Enter the exact Entity (File) Number issued by the California Secretary of State.)

2 0 2 2 0 0 3 1 0 2 1 1

3. New LLC Name (If Amending) (List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State. The name must contain an LLC identifier such as LLC or L.L.C. "LLC" will be added, if not included.)

IR Labs, LLC

2023 SEP 28 PM 12:40
DIVISION OF CORPORATIONS
SECRETARY OF STATE

4. Management (If Amending) (Select only one box)

The LLC will be managed by:

One Manager More than One Manager All LLC Member(s)

5. Purpose Statement (Do not alter Purpose Statement.)

The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

6. Additional Amendment(s) set forth on attached pages, if any, are incorporated herein by reference and made part of this Form LLC-2. (All attachments should be 8 1/2 x 11, one-sided, legible and clearly marked as an attachment to this form LLC-2.)

Signature

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

Sign here

Karen Anapoell, General Counsel

Print your name here

SECRETARY OF STATE



State of California
Secretary of State

CONV-1A

File #



For Office Use Only

-FILED-

File No.: BA20231188651
Date Filed: 7/25/2023

Certificate of Conversion

Fee: \$150.00 if a California corporation is the converting entity. \$30.00 for all other conversions.

This Space For Filing Use Only

Converted Entity Information

1. Name of Converted Entity
IR Labs DE, LLC

2. Form of Entity
Limited Liability Company

3. Jurisdiction
Delaware

4. Mailing Address of Principal Office of Converted Entity (Complete only if converting a California limited partnership)
City State Zip Code

5. Street Address of Principal Office of Converted Entity - Do not list a P.O. Box (Complete only if converting a California limited liability company or a registered California general partnership.)
City State Zip Code
4350 Westown Parkway, Suite 300 West Des Moines IA 50266

6. Street Address of the California Principal Office of Converted Entity, if any - Do not list a P.O. Box (Complete only if converting a registered California general partnership.)
City State Zip Code
CA

7. If the converting entity is a California corporation, limited liability company, limited partnership or general partnership, you must designate an agent for service of process. Item 7a: List the name of an individual or a corporation registered in CA under California Corporations Code section 1505 that agrees to be your agent for service of process. You may not list the converted entity as the agent. Item 7b: If the agent is an individual, list the agent's business or residential street address. Item 7c: If the agent is an individual, list the mailing address of the converted entity's agent. Do not list an address if the agent is a California registered corporate agent as the address for service of process is already on file.

a. Name of Agent For Service of Process
Howard Makler

b. If an individual, Street Address of Agent for Service of Process - Do not list a P.O. Box
City State Zip Code
751 BOLSANA CA 92651 LAGUNA BEACH, CA 92651

c. If an individual, Mailing Address of Agent for Service of Process
City State Zip Code
4350 Westown Parkway West Des Moines IA 50268

Converting Entity Information

8. Name of Converting Entity
IR Labs, LLC

9. Entity Type
Limited Liability Company

10. Jurisdiction
California

11. CA Secretary of State Entity Number, if any
202200310211

12. The principal terms of the plan of conversion were approved by a vote of the number of interests or shares of each class that equaled or exceeded the vote required. If a vote was required, the following was required for each class:
The class and number of outstanding interests entitled to vote AND The percentage vote required of each class.
Common units: 100 100%

Additional Information

13. Additional information set forth on the attached pages, if any, is incorporated herein by this reference and made part of this certificate.

14. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge. I declare I am the person who executed this instrument, which execution is my act and deed.

07/24/2023

Date

Signature of Authorized Person

Howard Makler, Member

Type or Print Name and Title of Authorized Person

Signature of Authorized Person

Type or Print Name and Title of Authorized Person

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A CALIFORNIA LIMITED LIABILITY COMPANY UNDER THE NAME OF "IR LABS, LLC" TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "IR LABS, LLC" TO "IR LABS DE, LLC", FILED IN THIS OFFICE ON THE TWENTY-FIFTH DAY OF JULY, A.D. 2023, AT 11:18 O'CLOCK A.M.

2023 SEP - 8 PM 12:40

SECRETARY OF STATE
DIVISION OF CORPORATION




Jeffrey W. Bullock, Secretary of State

7578799 8100F
SR# 20233040873

Authentication: 203817321
Date: 07-25-23

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

STATE OF DELAWARE
CERTIFICATE OF CONVERSION
FROM A NON-DELAWARE LIMITED LIABILITY COMPANY TO
A DELAWARE LIMITED LIABILITY COMPANY PURSUANT TO
SECTION 18-214 OF THE LIMITED LIABILITY ACT

- 1.) The jurisdiction where the Non-Delaware Limited Liability Company first formed is California.
- 2.) The jurisdiction immediately prior to filing this Certificate is California.
- 3.) The date the Non-Delaware Limited Liability Company first formed is January 1, 2022.
- 4.) The name of the Non-Delaware Limited Liability Company immediately prior to filing this Certificate is IR Labs, LLC.
- 5.) The name of the Limited Liability Company as set forth in the Certificate of Formation is IR Labs DE, LLC.

2023 SEP - 8 PM 12:40

SECRETARY OF STATE
DIVISION OF CORPORATIONS

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the
24th day of July, A.D. 2023.

By: /s/ Howard Makler
Authorized Person

Name: Howard Makler
Print or Type

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "IR LABS DE, LLC" FILED IN THIS OFFICE ON THE TWENTY-FIFTH DAY OF JULY, A.D. 2023, AT 11:18 O'CLOCK A.M.

FILED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2023 SEP - 8 PM 12:40




Jeffrey W. Bullock, Secretary of State

7578799 8100F
SR# 20233040873

Authentication: 203817321
Date: 07-25-23

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

STATE of DELAWARE
LIMITED LIABILITY COMPANY
CERTIFICATE of FORMATION

• **First:** The name of the limited liability company is IR Labs DE, LLC

• **Second:** The address of its registered office in the State of Delaware is 850 New
Burton Road Ste 201 in the City of Dover
Zip Code 19904.

The name of its Registered agent at such address is _____
Cogency Global Inc.

• **Third:** (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this
24th day of July, 2023.

By: /s/ Howard Makler
Authorized Person(s)

Name: Howard Makler
Typed or Printed

2023 SEP - 8 PM 12: 40
SECRETARY OF STATE
DIVISION OF CORPORATIONS