

W123000000838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

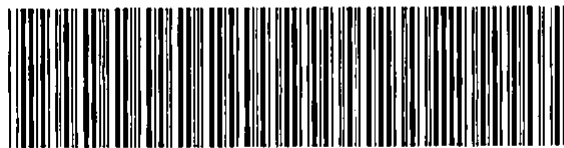
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. FRANKLIN
JAN 23 2023

Advanced Incorporating Service

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: wlopez@aisincfl.com
Website: www.aisincfl.com

NAME OF ENTITY

George Henry Capital, LLC

FOR OFFICE USE ONLY

PICK ONE:

CERTIFIED COPY PHOTOCOPY C.U.S.

FILE TYPE:

CORPORATION LLC LIMITED PARTNERSHIP GENERAL PARTNERSHIP
 FICTITIOUS NAME SERVICEMARK/TRADEMARK AMENDMENT
 FOREIGN QUALIFICATION JUDGMENT LIEN
 OTHER _____

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Of _____

POSTAL/NOTARY CERTIFICATION REQUEST:

Country _____

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DATE 1/20/23 TIME _____

Notes: _____

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:

Cape Henry Capital, LLC

(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."

Delaware

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

88-2651580

(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)

2321 Sandollar Ct

Street Address of Principal Office)

2321 Sandollar Ct

(Mailing Address)

Virginia Beach, VA 23451

Virginia Beach, VA 23451

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

Name: Universal Registered Agents, Inc.

Office Address: 1317 California Street

Tallahassee, Florida 32304 (City) (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.

(Registered agent's signature)

1. 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: Jarad Francis
 Member Address: 2321 Sandollar Ct
 Authorized Virginia Beach, VA 23451
 Person
 Other Other

Title or Capacity: Name and Address:
 Manager Name: Nicholas Thomas
 Member Address: 234 Walnut St
 Authorized Newport Beach, CA 92663
 Person
 Other Other

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person
 Other Other

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person
 Other Other

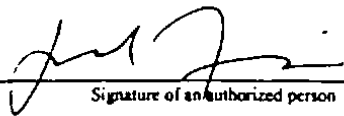
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person
 Other Other

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.



 Signature of an authorized person

Jarad Francis

 Typed or printed name of signer

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAPE HENRY CAPITAL, LLC" 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 TWENTIETH DAY OF JANUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAPE HENRY CAPITAL, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2022.

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

2023
NO FEE PAID




Jeffrey W. Bullock, Secretary of State

6822732 8300

SR# 20230205987

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

Authentication: 202539287

Date: 01-20-23