2023 California Secretary of State

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Secretary of State

LLC-5 Application to Register a Foreign Limited

Liability Company (LLC)

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

LLC-5 (REV 11/2023)

Certifled Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum

For Office Use Only

-FILED-

File No.: 202463815381 Date Filed: 9/9/2024

| California Franchise Tax Board each year. For more information, https://www.ftb.ca.gov/. | | This | Space For Office t | Jse Onl | у |
|--|-------------------------|--------------------|---------------------------|-------------|----------|
| 1a. LLC Name (Enter the exact name of the LLC as listed on your attached | d Certificate of Go | od Standing.) | | | |
| Gleam Lug | gage, LLC | • | | | |
| 1b. California Alternate Name, If Required (Only enter an alterna | te name if the LLC | name in 1a not | available in California. | } | |
| | | | | | |
| 2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached | Certificate of Good | d Standing.) | | | |
| a. Jurisdiction (State, foreign country or place where this LLC is formed.) | | | | | |
| Delav | vare | | | | |
| b. Authority Statement (Do not alter Authority Statement) | | | | | |
| This LLC currently has powers and privileges to conduct busine | ess in the state | e, foreign cour | ntry or place enter | ed in Ite | em 2a. |
| 3. Business Addresses (Enter the complete business addresses, Ite | ms 3a and 3b car | not be a P.O. Bo | ox or "In care of" an Ind | vidual or | entity.) |
| a. Street Address of Principal Office - Do not enter a P.O. Box | City (no abbrevia | State | Zip Code | | |
| 220 Newport Center Drive, 11-196 | Newport Beach | | CA | 92660 | |
| b. Street Address of Principal Office in California, If any - Do not enter a P.O. Box | City (no abbreviations) | | State | ZIp Code | |
| 220 Newport Center Drive, 11-196 | Newport Beach | | CA | 92660 | |
| c. If the Mailing Address is the same as item 3a or 3b, check the applicable box: | X]3a | | | | |
| d, Mailing Address - If different than item 3a or 3b | City (no abbrevia | (no abbreviations) | | te Zip Code | |
| | | | | | |
| 4. Service of Process (Must provide either Individual OR Corporation. |) | | | | |
| INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full | name and Californ | nia street address | s | | |
| a, California Agent's First Name (if agent is not a corporation) | Middle Name | Las | st Name | | Suffix |
| Anne | | | Casey | | |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box | City (no abbrevia | | State | Zip Code | |
| 220 Newport Center Drive, 11-196 | Ne | wport Beach | CA | 9: | 2660 |
| CORPORATION - Complete Item 4c only. Only Include the name of the | registered agent C | orporation. | | | |
| c. California Registered Corporate Agent's Name (if agent is a corporation) – Do no | t complete Item 4a | or 4b | | | |
| | | | | | |
| 5. Read and Sign Below (Title not required.) | | | | | |
| By signing, I affirm under penalty of perjury that the information | herein is true | and correct a | nd that I am author | rized to | sign |
| on behalf of the foreign LLC. | | | | | |
| | Anne Casey | | | | |
| Signature | Type and Print Name | | | | |

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLEAM LUGGAGE, 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 SIXTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLEAM LUGGAGE, LLC" WAS FORMED ON THE SIXTH DAY OF SEPTEMBER, A.D. 2024.

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

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

4977148 8300

Authentication: 204333966

Date: 09-06-24