

MI7000001447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
FEB 20 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2017

TIM POLLARD
7818 MOLT RD
BILLINGS, MT 59106

SUBJECT: MINISTRAT, LLC (DBA: ORATIUM)
Ref. Number: W17000002526

We have received your document for MINISTRAT, LLC (DBA: ORATIUM) and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 017A00000682

2017 FEB 14 PM 3:31
TALLAHASSEE, FL 32310

FILED
17 FEB 14 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FL 32310

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MINISTRAT, LLC

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:

TIM POLLARD

Name of Person

MINISTRAT LLC

Firm/Company

7818 MOLT RD

Address

BILLINGS, MT 59106

City/State and Zip Code

sean@oratum.com

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

For further information concerning this matter, please call:

TIM POLLARD

406

591-3849

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$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

FILED
FEB 16 PM 2:31
TALLAHASSEE, 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:

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

(FE) number, if applicable)

(Street Address of Principal Office)

(Mailing Address)

(Zip code)

(Registered agent's signature)

Signature of an authorized person

Typed or printed name of signee



CERTIFICATE OF EXISTENCE

I, **COREY STAPLETON**, Secretary of State for the State of Montana, do hereby certify that:

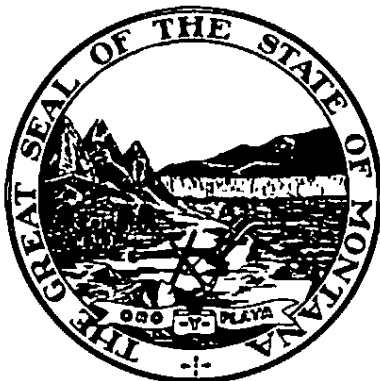
MINISTRAT, LLC

duly filed its Articles of Organization in this office on **March 13, 2006**, and on that date was authorized to transact business in this state for a term of Perpetual duration.

Payment is reflected in the records of the Secretary of State for all fees owed to the Secretary of State.

No articles of dissolution have been placed on record in this office by said limited liability company and the records indicate the limited liability company is in good standing under the laws of the State of Montana.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 10th day of February, 2017.

COREY STAPLETON

Montana Secretary of State

Certificate Number: 021020170331

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17 FEB 14 PM 2:31
SECRETARY OF STATE
TALAMON, JEFF