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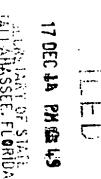
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COVER LETTER

	tegistration Section Division of Corporatio	ns				
SUBJEC"	Blackstad, Hrabe &	Kirkorsky, LLC				
300000		Name of L	Limited Liability C	ompany		
The enclo Existence,	sed "Application by Fo , and check are submitte	reign Limited Liability Comp ed to register the above refere	any for Authorizat nced foreign limite	ion to Trai d liability	nsact Business in Florida," Ce company to transact business	ertificat e of in Florida.
Please reti	urn all correspondence	concerning this matter to the f	following:			
	Lance Pershing	,				
		Na	nme of Person			
	Blackstad, Hra	be & Kirkorsky, LLC				
		Fi	rm/Company			
1119 W SOUTHERN AVE 2ND FLOOR MESA, AZ						
			Address			
•	MESA, AZ 8:	5210				
City/State and Zip Code						
	Lance@makpc.	com / Robert@makpc.com / L	_			
	<u> </u>	E-mail address: (to be used	for future annual	report not	fication)	
For furthe	er information concerni	ng this matter, please call:				
	Lance Pershing		480 at (551.217	73	
•	Name	of Contact Person	Area Code	Day	time 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				
	is a check for the follow \$125.00 Filing Fee	wing amount: S130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Cert of Status & Certified Copy	

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:

rizona (Jurisdiction under the law of whi		irida. The allemate name must include "Linuted	Liability Company," "L.L.C," or "LLC."
(Jurisdiction under the law of wh:		3. 22-3831920	
N/A	ich foreign hnuted hability company is organized)		umber, if applicable)
174 6			
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determi	registration.)	
1119 W. SOUTHERN A		6. 1119 W. SOUTHERN A	VE. 2ND FLOOR
(Street Address of Pr		(Mailing a	Address)
MESA, AZ 85210		MESA, AZ 85210	
			
Same and <u>street address</u>	of Florida registered agent: (P.O. Box	. NOT acceptable)	
Name:	Registered Agents Inc.		
Office Address:	3030 N. Rocky Point Dr. STE 150A		
Office Address.		-	
	Tampa	Florida <u>33607</u>	code)
gnated in this applican omply with the provision	ion, I hereby accept the appointment a ons of all statutes relative to the proper of my position as registered agent.	s registered agent and agree to a	ed liability company at the part in this capacity. I further by duties, and I am familiar
gnated in this application omply with the provision	ion, I hereby accept the appointment a ons of all statutes relative to the proper	s registered agent and agree to a	ict in his capacity. I freather
ignated in this applicant omply with the provision	ion, I hereby accept the appointment a ons of all statutes relative to the proper	s registered agent and agree to a and complete performance of n	nct in his capacity. I further by duties, and I fim fattiliar
ignated in this applicate omply with the provision accept the obligations The name, title or capac	ion, I hereby accept the appointment a, ons of all statutes relative to the proper of my position as registered agent.	s registered agent and agree to a and complete performance of n	ict in his capacity. I fracher ty duties, and I am familiar
gnated in this applicate omply with the provision accept the obligations	ion, I hereby accept the appointment a, ins of all statutes relative to the proper of my position as registered agent. (Registered agent's s	s registered agent and agree to a and complete performance of n	ict in his capacity. I fracher ty duties, and I am familiar
gnated in this applicate omply with the provision accept the obligations The name, title or capac	ion, I hereby accept the appointment a, ons of all statutes relative to the proper of my position as registered agent. (Registered agent's strity and address of the person(s) who han Name and Address: Robert Blackstad	is registered agent and agree to a and complete performance of n augusture) is/have authority to manage is/are Title or Capacity: Owner	nct in his capacity. I further by duties, and Liam familiar
gnated in this applicate omply with the provision accept the obligations. The name, title or capacity:	ion, I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent. (Registered agent's serity and address of the person(s) who han Name and Address: Robert Blackstad 1119 W SOUTHERN AVE 20	is registered agent and agree to a and complete performance of n augusture) is/have authority to manage is/are Title or Capacity: Owner	Name and Address: Name and Address: Mark Kirkorsky 1119 W SOUTHERN A
ignated in this applicate omply with the provision accept the obligations. The name, title or capacity:	ion, I hereby accept the appointment a, ons of all statutes relative to the proper of my position as registered agent. (Registered agent's strity and address of the person(s) who han Name and Address: Robert Blackstad	is registered agent and agree to a and complete performance of n augusture) is/have authority to manage is/are Title or Capacity: Owner	Name And Address:
gnated in this applicate omply with the provision accept the obligations. The name, title or capacity:	ion, I hereby accept the appointment acons of all statutes relative to the proper of my position as registered agent. (Registered agent's sority and address of the person(s) who han Name and Address: Robert Blackstad 1119 W SOUTHERN AVE 2N MESA, AZ 85210 Brandon Hrabe	s registered agent and agree to a and complete performance of a signature) as/have authority to manage is/are Title or Capacity: Owner Controller	Name and Address: Name and Address: Mark Kirkorsky 1119 W SOUTHERN A
gnated in this applicate omply with the provisions accept the obligations The name, title or capacity: Owner	ion, I hereby accept the appointment acons of all statutes relative to the proper of my position as registered agent. (Registered agent's strity and address of the person(s) who ha Name and Address: Robert Blackstad 1119 W SOUTHERN AVE 2N MESA, AZ 85210 Brandon Hrabe 1119 W SOUTHERN AVE 2N	s registered agent and agree to a and complete performance of a signature) as/have authority to manage is/are Title or Capacity: Owner Controller	Name and Address: Name and Address: Mark Kirkorsky 1119 W SOUTHERN A MESA, AZ 85210 Lance Pershing 1119 W SOUTHERN A
gnated in this applicate omply with the provision accept the obligations. The name, title or capacity: Owner	ion, I hereby accept the appointment acons of all statutes relative to the proper of my position as registered agent. (Registered agent's stative and address of the person(s) who has Name and Address: Robert Blackstad 1119 W SOUTHERN AVE 2N MESA, AZ 85210 Brandon Hrabe 1119 W SOUTHERN AVE 2N MESA, AZ 85210	s registered agent and agree to a and complete performance of a signature) as/have authority to manage is/are Title or Capacity: Owner Controller	Name and Address: Name and Address: Mark Kirkorsky 1119 W SOUTHERN A MESA, AZ 85210 Lance Pershing

Typed or printed name of signee





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Ted Vogt, Executive Director of the Arizona Corporation Commission, do hereby certify that

BLACKSTAD, HRABE & KIRKORSKY, LLC

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 21st day of November 2001.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 13th day of December, 2017, A. D.



Ted Vogt, Executive Director

3y: 1789191