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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: BIACKSTONE Consulting INC  (Name of corporation - Indust include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:    Verial Blackstone (Name of Person)
(Name of Person)
Blackstone (asolting, Fric (Firm/Company)
(Firm/Company)
200 39th St.
(Address)
E- P
FT. Piece FL 34945 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
VEVIN BLACKETONE at (330) 432-3277 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations  Division of Corporations
409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status & Certified Copy  □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

i.	ElACKSTONE Consulting (Enter name of corporation; must include "INCORPORAT "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"			_
	STARRLYNN, INC. (If name unavailable in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting bus	iness in l	Florida	<u>ı)</u>
2.	OHio (State or country under the law of which it is incorporated)	_ 3.				_
	(State or country under the law of which it is incorporated)		(FEI number, if applicable	e)		
4.	(Pate of incorporation)	5.	PERDETUAL			
	(Date of incorporation)		(Duration: Year corp. will cease to exist	or "perp	etual"	)
6.						_
			Florida, if prior to registration) 02, F.S., to determine penalty liability)			
7.	200 39Th ST.					
•	(Principal office	add	ress)			
	FT. Pierce FL (Current mailing		34945			
	(Current mailing	add	ress)			_
8.	(Purpose(s) of corporation authorized in home state of	<u> </u>				
	(Purpose(s) of corporation authorized in home state of	or co	untry to be carried out in state of Florida)	<b>28</b>	40	
9.	Name and street address of Florida registered agent: (	(P.C	. Box NOT acceptable)		NON	T
	Name: Kevin Blackstone			SSE 25	9	
Of	ffice Address: ZOO 39Th ST		<del></del>	20		
	FT PIERCE (City)		, Florida <u>34945</u> (Zip code)	BA	84:11:18	
	(- ··•)		• • •			

10. Registered agent's acceptance:

Ç,

Having been named as registered agent and to accept service of process for the above stated corporation 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.

in Lachton
(Registered agent's signature)

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A., DIRECTORS	
Chairman: KEVIN BIACK STEALE	
Address: 200 3974 St.	
FT. PIERCE, FL 34945	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	
Auguess.	
Vice Precident	
Vice President:Address:	
Augress.	
Secretary:	
Address:	
Treasurer:	
Address:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. Kanin Elosehatore	
(Signature of Director or Officer listed in number 12 of the application)	
13. (Signature of Director or Officer listed in number 12 of the application)  14. VEVIN BACKSTONE  (Typed or printed name and capacity of person signing application)	

## United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show BLACKSTONE CONSULTING, INC., an Ohio corporation, Charter No. 1482859, having its principal location in New Philadelphia, County of Tuscarawas, was incorporated on August 12, 2004 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 15th day of November, A.D. 2004

Quett Cachwell

**Ohio Secretary of State** 

Validation Number: V2004319N4B56A