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(Re	equestor's Name)	
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# FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2019

CHARLES A GARLAND 9695 PALMA VISTA WAY BOCA RATON, FL 33428

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

- The document must contain both the street address of the principal office and the mailing address of the entity.
- The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Yvette Scott Document Specialist II

Letter Number: 519A00023595

RECEIVED
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## **COVER LETTER**

то:	Registration Section Division of Corpor						
	BLOKHIRE, INC						
SUBJ	JECT:	Name of corporati	ion - mus	t include suffix			
Dear S	Sir or Madam:						
"Certi above Please	ficate of Existence," referenced foreign co	by Foreign Corporation for "Certificate of Good Sorporation to transact businence concerning this mat	tanding" iness in f	and check are su Ilorida.			
		Name o	of Persor	1	Ü.C.		
BLOK	HIRE, INC				FLG FLG	PH 2	
9695 F	PALMA VISTA WAY	Firm/Co	ompany		RIDA	16	
		Ad	dress				
ВОСА	RATON, FL 33428						
CHAR	LESGBIZ@GMAIL.C	City/State	and Zip	code			
		E-mail address: (to be use	d for fut	are annual report	notification)		
For fu	rther information cor	cerning this matter, pleas	e call:				
CHAR	LES GARLAND	754	. 30	7-6741			
	Name of Person	at ( at C	ode	Daytime Teler	phone Number		
	STREET/COURI Registration Section Division of Corporn Clifton Building 2661 Executive Central Tallahassee, FL 32	n ations nter Circle		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7		
Enclos	sed is a check for the	following amount:					
<b>□</b> \$70	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		75 Filing Fee & ified Copy	S87.50 Filing Certificate of Certified Co	f Status &	

### 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.

BLOKHIRE, INC  I. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"					
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
2.	DELEWARE 83-4703539				
	(State or country under the law of which it is incorporated) (FEI number, if applicable)				
4.	APRIL, 24 2019 5 5				
	(Date of incorporation)  5. (Date of duration, if other than perpetual)				
6.					
	(Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)				
7	9695 PALMA VISTA WAY BOCA RATION, FLESSIBA =				
۲٠,	(Principal office address)				
	9695 PALMA VISTA WAY BOCA RATON, FL 33428				
	(Current mailing address, if different)  ORDER  16				
8.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)				
	Name: CHARLES GARLAND				
0	Mice Address: 9695 PALMA VISTA WAY				
	BOCA RATON . Florida 33428 (City) (Zip code)				

#### 9. Registered agent's acceptance:

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 dosition as registered agent.

(Registered agent's signature)

10. 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.

A. DIRECTORS Chairman: Vice Chairman: Address: \_\_\_\_\_\_ Director: **B. OFFICERS** C.E.O MIKEL CALDERON President: 470 NE 5TH AVE #3308 FT. LAUDERDALE, FLORIDA 33301 PRESIDENT CHARLES A GARLAND Vice President: \_\_ 9695 PALMA VISTA WAY BOCA RATON, FL 33428 Address: \_ Address: \_\_ Treasurer: \_\_\_ Address: NOTE: If necessary, you may attach an additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who/is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. CHARLES A GARLAND PRESIDENT

(Typed or printed name and capacity of person signing application)

11. Names and business addresses of officers and/or directors:



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BLOKHIRE INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FIFTEENTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLOKHIRE INC."

WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF APRIL, A.D. 2019.

2019 DEC 12 PM 2: 16

Authentication: 203296700

Date: 08-15-19

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