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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

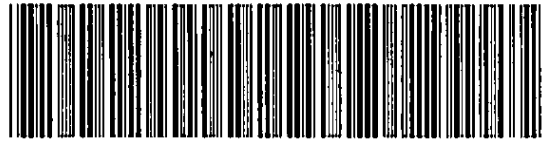
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W20000132582

Office Use Only



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11/16/20--01029--023 \*\*70.00

DEC 10 PM 3:25  
CLERK OF COURT

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12/10/20 ✓



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 18, 2020

ESTEBAN SALAZAR  
5214F DIAMOND HTS BLVD  
#753  
SAN FRANCISCO, CA 94131

SUBJECT: BLACKBIRD STUDIOS, INC.  
Ref. Number: W20000132582

We have received your document for BLACKBIRD STUDIOS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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: 320A00023254

RECEIVED

DEC 08 2020

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Blackbird Studios, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

Esteban Salazar

Name of Person

Blackbird Studios, Inc.

Firm/Company

5214F Diamond Heights Blvd #753

Address

San Francisco, CA 94131

City/State and Zip code

steve@blackbird.us

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

For further information concerning this matter, please call:

Dawn Uhalley

at (301) 641-0901

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
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.*

1. Blackbird Studios, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Blackbird Studios Software

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California 3. 81-4043043  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/23/2016 5. (Perpetual)  
(Date of incorporation) (Date of duration, if other than perpetual)

6. 10/13/2020  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 870 Market St #861, San Francisco, CA 94102  
(Principal office street address)

5214F Diamond Heights Blvd #753, San Francisco, CA 94131  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

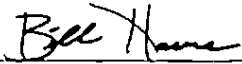
Name: Registered Agents Inc.

Office Address: 7901 4th St N STE 300

St. Petersburg , Florida 33702  
(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 position as registered agent.*

  
\_\_\_\_\_  
(Registered agent's signature)

Registered Agents Inc.  
Bill Havre - Assistant Secretary

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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☐ Chairman Name: Esteban Salazar  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director 5214F Diamond Heights Blvd #753  
☒ President San Francisco, CA 94131  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Alex May  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director 5214F Diamond Heights Blvd #753  
☐ President San Francisco, CA 94131  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

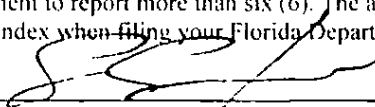
☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.   
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.

13. Esteban Salazar, CEO  
(Typed or printed name and capacity of person signing application)

**State of California**  
**Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

BLACKBIRD STUDIOS, INC.

FILE NUMBER: C3941885  
FORMATION DATE: 08/23/2016  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

FILED  
IN  
MAY 2020

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The entity is authorized to exercise all of its powers, rights and  
privileges in California.

This certificate relates to the status of the entity on the Secretary  
of State's records and does not reflect documents that are pending  
review or other events that may affect status.

No information is available from this office regarding the financial  
condition, status of licenses, if any, business activities or  
practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of October 23, 2020.

**ALEX PADILLA**  
Secretary of State