(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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SECRETARY CE STATE
TALLASINS CEPTARE



November 27, 2023

STACY HUNT 9975 O'BRIEN CREEK RD MISSOULA, MT 59804 US

SUBJECT: HUNT COMMUNICATIONS, INC.

Ref. Number: W23000158127

We have received your document for HUNT COMMUNICATIONS, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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

Letter Number: 223A00027020

Ariel Jones Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section	
SUBJECT: Name of corporation	cations Inc. DBA -must include suffix)
Dear Sir or Madam:	- must include suffix / Confluence Communicat
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stan above referenced foreign corporation to transact businesses."	ding" and check are submitted to register the
Please return all correspondence concerning this matter	,
(Ivaille of	Person c.DBAConfluenceCommunicali pany
99750'Brien Creek	ckd
Missoula, Mt 5 City/State as	,
City/State as	nd Zip code
Stacy@ Confluencec E-mail address: (to be used f	Com
E-mail address: (to be used f	or future annual report notification)
For further information concerning this matter, please c	ali:
Stacy Hunt a1 406	5509397
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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32303 Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	OF STATE \$78.75 Filing Fee & Certified Copy 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.

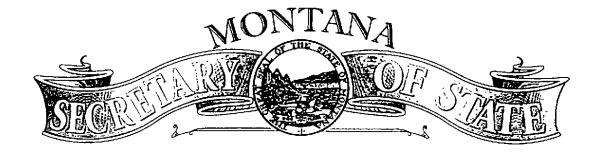
1. Hunt Communic	· · · · · · · · · · · · · · · · · · ·	"COMPANY" "COPPORTATION	
	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	,,
(If name unavail	lable in Florida, enter alternate corporate name a	donted for the nurroose of transacting	husiness in Florida)
Montana		_	•
(State or count	ry under the law of which it is incorporated)	(FEI number, if appl	icable)
4. 12	· 2008 5.		
(Date	e of incorporation)	(Date of duration, if other tha	an perpetual)
6			
	(Date first transacted business in (SEE SECTIONS 607,1501 & 607,150	Florida, if prior to registration) 22, F.S., to determine penalty liability)
7. 9970	50 Brien Creek	Rd, Missoula	MR 5980
	(Principal office	e <u>street</u> address)	OR PR
			27 2
	(Current mailing	address, if different)	
8 Name and stree	et address of Florida registered agent; (P.O.	Box NOT acceptable)	TOP A ST
Name:	Registered Agents Inc	box 1401 acceptable)	159 FIL
Office Address:	7901 4th St N STE 300		
	St. Petersburg	—	
	(City)	(Zip code)	
Posistand ass	0mt ² a 2000mta-200		
 Registered age Having been nam 	eut's acceptance: ted as registered agent and to accept service	of process for the above stated c	orporation at the place
designated in this	application, I hereby accept the appointme	ent as registered agent and agree	to act in this capacity. I
and I am familiar	omply with the provisions of all statutes relivents with and accept the obligations of my positions.	utive to the proper and complete p tion as registered agent.	performance of my duties,
J	David Solvents		
	(Registered agent's sign	nature)	

under the law of which it is incorporated.

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

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

A. DIRECTORS			1		
□Chairman	Name: Stacy Hunt	□Chairman	Name: Andraw Hunt		
□ Vice Chairman	Address: 99730 Brien	□Vice Chairman	Address: 9975 0 Brien		
	Creek	□Director	Creek rd		
The President	Missoula MT	□President	Missoula MT		
□Vice President	59804	SVice President	59804		
☐ Secretary	□Treasurer	Secretary	□Treasurer		
□Other	Other	□Other	□Other		
	Name: Staly Hunt	□Chairman	Name:		
	Address: 9975 D'Brien	□Vice Chairman	Address:		
	112CKRd	□Director			
<i>i</i>	Missoula WMT	□President			
□ Vice President	59804	□Vice President			
□Secretary	□Treasurer	Secretary	[] Treasurer		
□Other	Other	□Other	Other		
Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□ Vice Chairman	Address:		
□Director	·	□Director			
□President		□President			
☐Vice President		□Vice President			
□Secretary	□Treasurer	☐ Secretary	□Treasurer		
Other	Other	□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.	(Typed or printed name and capacity of person	Vreside	ent, chairman,		
	(Typed or printed name and capacity of person	signing application) juiner		



CERTIFICATE OF EXISTENCE

I, CHRISTI JACOBSEN, Secretary of State for the State of Montana, do hereby certify that:

HUNT COMMUNICATIONS, INC.

duly filed its Articles of Incorporation for Domestic Profit Corporation in this office on December 22, 2008, 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.

The most recent annual report has been filed with this office.

No articles of dissolution have been placed on the record in this office by said corporation and the records indicate the corporation 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 the 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 27th day of September, 2023.

Christi Gaertians

Christi Jacobsen

Montana Secretary of State

Certificate Number: 45324332