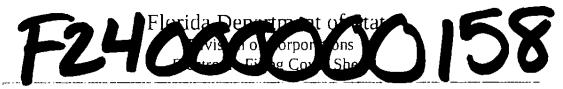
To 18506176383

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From: Registered Agents Inc.

Fax: 8134365206

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Fmail	Address:			
CINOTI	MUULESS.			

### FOREIGN PROFIT/NONPROFIT CORPORATION blue raven Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
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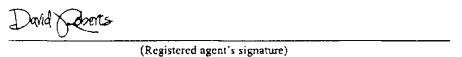
JAN 1 1 2024 K. Brumblery

### 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.

To 18506176383

1.	blue raven Inc.  (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  (Enter name of corporation); must include "INCORPORATED," "COMPANY," "CORPORATION,"						
		orporation; must include "INCORPORATE!  Orp," "Inc," "Co," or "Corp.")	D, "CC	OMPANY, "CORPORATIO	M,		
1	(If name unavaila	ble in Florida, enter alternate corporate nam	ne adopt	ed for the purpose of transacti	ng busines	s in Flo	rida)
2.	Virginia	1	3.	47-293854	2		
	(State or country under the law of which it is incorporated)			(FEI number, if applicable)			
4.							
	(Date of incorporation)			(Date of duration, if other than perpetual)			
6.		(Date first transacted business		A. 16 of a second board and			
		(SEE SECTIONS 607.1501 & 607.			lity)		
7.	901 4th St N STE	300 St. Petersburg FL 33702					
			ffice str	eet address)			
F ~	P.O. Box 320112	Alexandria Virginia 22320					<del></del>
		(Current mai	ling add	ress, if different)		2	
8.	Name and stree	t address of Florida registered agent: (P	P.O. Bo:	NOT acceptable)	: •,	024 .	
		Registered Agents Inc		<u></u>	: .	1024 JAN 10	<u>;</u>
	Name:	7901 4th St N STE 300			•	0	EXE
Office Address:	fice Address:	7337 -41 64 4 51 2 300					
		St. Petersburg		, Florida 33702	:	5: 0	
		(City)		(Zip code)	-	00	
		nt's acceptance:					
		ed as registered agent and to accept ser application, I hereby accept the appoin					
fur	ther agree to co	emply with the provisions of all statutes	relativ	e to the proper and comple			
anı	t I am familiar	with and accept the obligations of my p	position	as registered agent.			



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.

1/10/2024 13:14:17 PST

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To: 18506176383

From; Registered Agents Inc

Fax: 8134365206

A. DIRECTORS  Chairman  Vice Chairman  Director  President  Vice President  Secretary	Hepperle, John Name.  7901 4th St N STE 300 Address: St. Petersburg FL 33702	□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other	Niner, Michael Name:  7901 4th St N STE 300 Address:  St. Petersburg FL 33702  ☐Treasurer ☐Other		
□ Director □ President	Cabana, Joshua  Name:  7901 4th St N STE 300  Address:  St. Petersburg FL 33702   ☐ Treasurer  ☐ Other	□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other	□Treasurer		
□ Director □ President □ Vice President □ Secretary □ Other Important Notice: individuals may be	Use an attachment to report more than six (6). The attac added to the index when filing your Florida Departmen	□ Director □ President □ Vice President □ Secretary □ Other □ hment will be imaged to of State Annual Res	d for reporting purposes only. Non-indexed port form.		
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.					

# Commontoealth of Hirginia



To, 18506176383

## State Corporation Commission

#### CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That blue raven Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on January 28, 2015;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

December 27, 2023

Bernard J. Logan, Clerk of the Commission