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.

(((H13000222924 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: NORTHWEST REGISTERED AGENT LLC

Account Number : I20090000081

: (509)768-2249

Fax Number

: (323)544-4790

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

₩1	Address:			
DMQ11	Address:			

Foreign Limited Liability Company HAMMERMILL &MASTERSON LLC

ويرا المستون المستون في المستون المستو		-
Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$125.00	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STA	TEOF FLORIDA.
1. HAMMERMILL & MASTERSON LLC	The printing of the state of th
(Name of Foreign Limited Liability Company; must include if	Limited Liability Company, "LLC," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of consent of the managers or managing members adopting the alternate Company," "L.L.C," "LLC.")	f transacting business in Florida and attach a copy of the written e name. The alternate name most include "Limited Liability
2. WY 3	THE LANGE TO SECURITION OF THE PARTY OF THE
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
7.	PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6 Read bustons in Bloods	(furior to registration)
(Date first transacted business in Florida (See sections 608.501 & 608.502 F.S. to d	letermine penalty liability)
7. 3030 N. ROCKY POINT DR. STE 150A	
TAMPA, FL 33607	
(Street Address of P	rincipal Office)
8. If limited liability company is a manager-managed cor	npany, check here ng members or managers are as follows:
9. The name and usual business addresses of the managin	ng members or managers are as follows:
THOMAS KEESEE-3030 N. ROCKY POINT D	
TAMPA, FL 33607	
10. Attached is an original certificate of existence, no more than 90 days the jurisdiction under the law of which it is organized. (A photocopy is a translation of the certificate under each of the translation must be submitted.	not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or pro-	omoted in Florida:
CUSTOMER SERVICE AND BILLING	·
Wah-	
Signature of a member or an author	rized representative of a member.
(In accordance with section 608.408(3), F.S., the execution	
penalties of perjury that the facts stated herein are true. I	am aware that any faise information submitted in a

Typed or printed name of signee

DAN KEEN

H130002229243

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability C	ompany is:				
HAMMERMILL & MASTER	RSON LLC	_			
If unavailable, the alternate to be used i	n the state of Florida is:				
2. The name and the Florida street add	ress of the registered agent and office are:				
Registered Agents I	inc.				
	(Name)				
3030 N. Rocky Point Dr. STE 150A					
Florida Street	Address (P.O. Box <u>NOT</u> ACCEPTABLE)				
Tampa	_{FL} 33607				
	City/State/Zip	•			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Dan Keen-President
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF WYOMING Office of the Secretary of State

i, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Hammermill & Masterson LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on January 25, 2012, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2012-000615288.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 7th day of October, 2013 at 12:49 PM. This certificate is assigned 014472732.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.

H130002229243