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15 MAR 25 AN 7: 50 SECRETARY OF STATE TALL AHASSEE, FLORID

LPR 1 6 2015

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

Tall Stone Asset Management, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Please return all corresponde	nce concerning this m	atter to the	following:			
Phillip	Simon					
		Na	me of Person			
· ·		Fir	m/Company		·	
1232	Stonehurs	st Wa	ıy			
			Address			
Tallal	nassee, Fl	orida	32312			
	-	City/Sta	ate and Zip Code			
P	Simon 197 E-mail address	300	ighoo. G) M		
	E-mail address	: (to be us	for future annual rep	oort notific	ation)	
For further information conce	rning this matter, plea	se call:				
Entity Cre	ation		800 at (375	52453	
Na Na	me of Contact Person		Area Code	Day	ytime Telephone Nu	ımber
MAILING ADDRE Division of Corporal Registration Section P.O. Box 6327 Tallahassee, FL 323	ions	Division Registra Clifton I 2661 Ex	T ADDRESS: of Corporations tion Section Building ecutive Center Cir see, FL 32301	cle		
Enclosed is a check for t	he following amou	unt:				
■ \$125.00 Filing Fe		ig Fee &	□ \$155.00 Filing Certified Cop			g Fee, Certificate Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Lin	ited Liability Company," "L.L.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting ability Company, "L.L.C," or "LLC.")	~
_{a.} Alaska _{3.} 4'	7-3254419
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
March 23, 2515 (Date first transacted business in Florida.	if prior to registration.)
(Date first transacted business in Florida. (See sections 605.0904 & 605.0905, F.S. to	
1231 W Northern Lights Blvd #	
Anchorage, AK 99503	AR 25
1232 Stonehurst Way	cipal Office)
Tallahassee, FL 32312	TATE ORID
(Mailing Addr	ess)
7. The name, title or capacity and address of the person(s)	who has/have authority to manage is/are:
Phillip Simon, Member and Molly	/ Simon, Member
1232 Stonehurst Way	
Tallahassee, FL 32312	
. Attached is an original certificate of existence, no more the aving custody of records in the jurisdiction under the law occeptable. If the certificate is in a foreign language, a transmust be submitted)	f which it is organized. (A photocopy is not

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Phillip Simon

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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	Company	/ is:

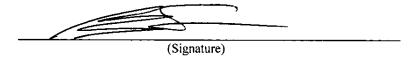
Tall Stone Asset Management, LLC

If unavailable, the alternate to be used in the state of Florida	is:	
· · · · · · · · · · · · · · · · · · ·		

2. The name and the Florida street address of the registered agent and office are:

Phillip Simon	
	(Name)
1232 Stonehu	ırst Way
Florida Street A	Address (P.O. Box NOT ACCEPTABLE)
Tallahassee	_{FL} 32312
	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 605, Florida Statutes.



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

15 MAR 25 AM 7:51
SECRETARY OF STATE
TALL A HASSEF, FLORID

Alaska Entity #10026459

State of Alaska

Department of Commerce, Community and Economic Development Corporations, Business and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Tall Stone Asset Management, LLC

This entity was formed on January 23, 2015 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **February 27, 2015**.

Fred Parady Commissioner