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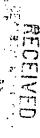


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COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: AGMT 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:
Aaron Graham Name of Person
Firm/Company
713 N. Lone Oak Way
Flagstaff AZ 86004 City/State and Zip Code Graham caddy Q yahoo. com E-wail address: (to be used for future annual report notification)
Estal address: (to be used for future annual report notification)
For further information concerning this matter, please call:
A aron Graham at (928) 853-2067 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{array}{c} \\$ \$125.00 \text{ Filing Fee} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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 FOR COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	DREIGN LIMITE	D LIABII.	ΠY
AGMT 11C			
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	.LC.")	_	
AGMT LLC Florida (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name		_	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Liability Company," "L.L.C," or "LLC.")	must include "L	imited	
2. State of Arizona 3.			
2. The state of Arizona 3. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)		_	
4			
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 7/3 N. Lone Oak Way			
Flagstoff AZ 86004	₩S	1 6	
(Street Address of Principal Office)	Ē	8	
6. 713 N. Lone Oak Way		<u></u>	2.1
Flagstaff AZ 8600'4			
(Mailing Address)	11 to 12	PH:	فرية
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)		*. 0	
Name: Charles Good Perkins, JR.	₹'''	177	
Office Address: 2104 Delta Way Suite 5			
Tallahassee , Florida 32303 (Zip code)			
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability	y company at i	he place	e
designated in this application, I hereby accept the appointment as registered agent and agree to act in this to complywith the provisions of all statutes relative to the proper and complete performance of my duties, a	capacity. I fur	ther agi	ree
accept the obligations of my position as registered agent.	ma r um jumu	147 TY1171	unu
(Registered agent's signature)			
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:			
Aaron Graham/Managing Member, 713 N. Love Oak Way			
Flagstaff AZ 8600	4		
J	,		
O Attached in a contificate of eviatorias memory than 00 days ald duly with a first house and		ساه نست	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cu jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the	stody of record he certificate u	is in the nder oat	h
of the translator must be submitted)			
- Kine Vill			
Signature of an authorized person			
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any f submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.1.	alse informatio 55, F.S.	n	
Rene Williams			
Typed or printed name of signee			





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby certify that

AGMT, LLC

a domestic limited liability company organized under the laws of theState of Arizona, did organize on the 24th day of February 2015.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 30th Day of September, 2016, A. D.



Todi A. Jerick Executive Director

By:

Cene Will