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### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

November 16, 2016

KENNETH C. BULLARD PO BOX 1374 GULF BREEZE, FL 32562

SUBJECT: BLUE SKY INNOVATIONS, L.L.C.

Ref. Number: W16000077440

We have received your document for BLUE SKY INNOVATIONS, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tanisha L Washington Regulatory Specialist II

Letter Number: 416A00024544

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:	Blue Sky Innovatio	ns, L.L.C.					
		Name of	Limited Liability	Company			
					ansact Business in Florida," Certifi y company to transact business in F		
Please return	all correspondence	concerning this matter to the	following:				
	Kenneth C. Bu	Illard					
		N	ame of Person				
	Blue Sky Inno	vations, L.L.C.					
	Firm/Company						
	PO Box 1374						
			Address				
	Gulf Breeze, F	L 32562					
	·····	City/S	tate and Zip Code	!			
	ken.bullard@blu	ieskyinnovations.org					
		E-mail address: (to be use	d for future annua	l report not	ification)		
For further in	formation concerning	ng this matter, please call:					
Ken	neth C. Bullard		337 at (	280-03	93		
	Name	of Contact Person	Area Code	Day	time Telephone Number		
Divis Regi P.O.	LING ADDRESS sion of Corporation stration Section Box 6327 thassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding ecutive Center Circle see, FL 32301		
	check for the follow 25.00 Filing Fee	ving amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	□ \$155.00 Fili Certified Copy		■ \$160.00 Filing Fee, Certificat of Status & Certified Copy	te	

## 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:

1. Blue Sky Innovations,			
~ \	eign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.," or "	LLC.")
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose of transi	acting business in Florida. The alternate name	must include "Limited
2. State of Louisiana		0-4283708	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4			
	(Date first transacted business in Flor (See sections 605.0904 & 605.0905, F.S.	ida, if prior to registration.) i. to determine penalty liability)	
5. 213-B S, Baylen St.			
Pensacola, FL 32502		·	
PO Box 1374	(Street Address of Principal C	Office)	音道・表
6. 10 Box 1574			<b>B C</b> -
Gulf Breeze, FL 32562		<del></del>	-5-F
7 31	(Mailing Address)		
/. Name and street addres	ss of Florida registered agent: (P.O. Box )  Kenneth C. Bullard	NOT acceptable)	
Name:			IIO: 06
Office Address:	213-B S. Baylen St.	<del></del>	
	Pensacola	, Florida	
Registered agent's accep	(City)	(Zip code)	
Having been named as re designated in this applica	gistered agent and to accept service of pr tion, I hereby accept the appointment as	ocess for the above stated limited liabili registered agent and agree to act in this	ity company at the place
to complywith the provision	ons of all statutes relative to the proper a my position as registered agent.	nd complete performance of my duties,	and I am familiar with and
accept the bougations of t	y position as registered agent.	$\bigcirc$	
	(Registered agent	t's signature)	
8. The name, title or capa	ncity and address of the person(s) who has	/have authority to manage is/are:	
	vner/Manager or Kenneth C. Bullard - Ow		
213-B S. Baylen St.			<del></del>
Pensacola, FL 32502			<del></del>
9. Attached is a certificate urisdiction under the law of the translator must be su	of existence, no more than 90 days old, do of which it is organized. (If the certificate abmitted)  Hallow Bollow	uly authenticated by the official having criss in a foreign language, a translation of	ustody of records in the the certificate under oath
	Signature of an auth		
This document is executed submitted in a document to	in accordance with section 605,0203 (1) ( the Department of State constitutes a third	b), Florida Statutes. I am aware that any degree felony as provided for in s.817.1	false information 155, F.S.
	Kenneth C. Bullard		

Typed or printed name of signee

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

#### **BLUE SKY INNOVATIONS, L.L.C.**

Domiciled at LAFAYETTE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on February 09, 2006,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

November 10, 2016

Certificate ID: 10766169#93P83

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

CONTIDENCY THE TARY OF

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