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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	12000000019	95
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REFERENCE : 397080 , 7212588

AUTHORIZATION : Oppulation

COST LIMIT : \$ 125.00

ORDER DATE: September 19, 2018

ORDER TIME : 1:57 PM

ORDER NO. : 397080-005

CUSTOMER NO: 7212588

<u>FOREIGN_FILINGS</u>

NAME: R.W. BLOCK CONSULTING, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

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CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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:

it manie maratiatae, cinci attenuate i	ame adopted for the purpose of transacting business in Fk	orida. The alte	rnate name must include "Limited Lie	abihty Company," "I	.1.C," or "11.C.")
DELAWARE		2	54-20783		
(Junsdiction under the law of w	hich foreign limited liability company is organized)	ے ۔د	(FEI num	ber, if applicable)	
·	(Date first transacted business in Florida, if prior to	registration)			
971 Ower Dand Switz	(See sections 605,0904 & (05,0905, F.S. to determ		• •		. =
871 Outer Road, Suite	Principal Office)	6. <u>-</u>	371 Outer Road, Suite B (Mailing Ad-	iress)	<u> </u>
Orlando, FL 32814			Orlando, FL 32814	·	
					<u> </u>
		_	• • • • • • • • • • • • • • • • • • • •	·	٠ .
Name and street address	ss of Florida registered agent: (P.O. Box	r NOT ac	centable)		
. Traine the <u>buyor addres</u>	- · · · · · · · · · · · · · · · · · · ·	1101	ecpaioic)		
Name:	Corporation Service Company				
Office Address:	1200 Hays Street				(v)
01110010101	T. Habana I. C.				
	Tallahassee, Leon County		, Florida 32301 (Zip coo	• •	
daving been named as re lesignated in this applica o comply with the provisi		is register	or the above stated limites ed agent and agree to acc plete performance of my	d liability com in this capaci	ity. I further a am familiar wi
faving been named as re lesignated in this applica to comply with the provisi and accept the obligation. 3. The name, title or capa	tance: gistered agent and to accept service of stion, I hereby accept the appointment a stone of all statutes relative to the proper of my position as registered agent. (Registered agent's actity and address of the person(s) who have	ns register r and com signature) as/have au	or the above stated limited agent and agree to act plete performance of my Roxa Asst. V	d liability com in this capaci duties, and I i nne Turne ice Preside	iy. I further a am familiar wi ent
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Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "R. W. BLOCK CONSULTING, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "R. W. BLOCK CONSULTING, LLC" WAS FORMED ON THE TENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

7050680 8300

Authentication: 203398439

Date: 09-11-18