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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 COMPANYTO TRANSACT BUNINESS IN THE STATE OF FLORIDA:

, PMA Ventures, LLC

(Jurisdiction under the law of which foreign limited liability company is organized) (Pill number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5 505 Old Steese Hwy Ste 122 (Street Address of Principal Office) 6, 502 S. Main St. Fairbanks, AK 99701 Millstadt, IL 62260 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Not acceptable) Name: Bonnie Maserang Good for the mathematic transaction of the set of the		nsacting business in Florida. The alternate name must include "Limited Liability Compan	
(Date first transacted business in Plonda, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 505 Old Steese Hwy Ste 122 6. 502 S. Main St. (Mailing Address of Principal Office) Fairbanks, AK 99701 Millstadt, IL 62260 V. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Not acceptable) Name: Bonnie Maserang Mame: Bonnie Maserang	Alaska (Incidention under the law of which foreign limited liability compared	nv is organized) 3	ble)
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Name: Name: Bonnie Maserang Bonnie Ma	(Street Address of Principal Office)	-	\sim
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Name: <u>Bonnie Maserang</u> <u>Bonnie Maserang</u>	Fairbanks, AK 99701	Ministadt, 12 02200	<u> </u>
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Name: <u>Bonnie Maserang</u> <u>Bonnie Maserang</u>			
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Name: <u>Bonnie Maserang</u> <u>Bonnie Maserang</u>			
Rame 30940 Chesa peake Bay Di.	7. Name and street address of Florida registered a	igent: (P.O. Box <u>NOT</u> acceptable)	
The Address Boy Dia So 940 Chesa Deake Boy Di.	Name: Bonnie Maseran	g	P. Kr
		30940 Chesa peako	e bay pr.
Office Address.	Office Address:	33543	

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

onn (Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Member	Philip Acker 502 S. Main St. Millstadt, IL 62260	Member	Lauren Acker 8353 Autumn Teal Ave bas Vegus, NV 29178
Member	Kyle Acker 1059 Jessica Livermore, CA 94	 	

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Signature of an authorized person

Philip Acker

Typed or printed name of signee

Alaska Entity #10092867

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:

PMA Ventures, LLC

This entity was formed on October 12, 2018 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 October 12, 2018.

Milee Marane

Mike Navarre Commissioner

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