# MEGEOGA

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Y SCOTT Jun 27 2019 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 821530 7784975 AUTHORIZATION : COST LIMIT : ORDER DATE: June 25, 2019 ORDER TIME : 7:31 PM ORDER NO. : 821530-005 CUSTOMER NO: 7784975 FOREIGN FILINGS NAME: KATMAI MANAGEMENT SERVICES, LLCXXXX QUALIFICATION (TYPE: <u>LL</u>) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

#### **COVER LETTER**

то:	Registration Section Division of Corporations							
SUBJE	Katmai Management Ser	vices, LLC						
		Name of Limited Liability Company						
	losed "Application by Foreign e, and check are submitted to t							
Please re	eturn all correspondence conce	erning this matter to the fo	ollowing:					
		Len	a Delgado					
		Nan	ne of Person	·				
		Katmai Gove	ernment Service	es, LLC	7 %			
		Firm/Company						
		Firm/Company  11001 O'Malley Centre Drive, STE 204						
		Address						
		Anchorage, AK 99515						
		:	7.0A	4				
			@katmaicorp.co					
T €		nail address: (to be used f	or tuture annua	терогі поппса	mon)			
ror turtn	er information concerning this	matter, please call:						
	Lena Delgado		907 at (	290-8693				
	Name of Cor		Area Code	/ Daytime	Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET AD Division of C Registration S Clifton Buildi 2661 Executiv Tallahassee, I	orporations Section ing ve Center Circle			
	Enclosed is a check for the fol Please make check payable to:	FLORIDA DEPARTM	_		□ aucc 22 =:::			
	\$125.00 Filing Fee	\$130.00 Filing Fec & Certificate of Status		Filing Fee & led Copy	☐ \$160.00 Filing of Status & Cert			

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

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

L. Katmai Management								
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability C	ompany," "L L C.," or "I.	J.C.")	<del></del>			
(If name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	orida. The altern	nate name must include "Limi	ted Liability Company," "L. E.C.	(" O.L.L" to ".			
Alaska		, 8	80-0529101					
(Jurisdiction under the law of which foreign lumited liability company is organized)			(FE	I number, if applicable)	(pplicable)			
4	(Date first transacted business in Florida, if prior to	registration.)						
40004.0	(See sections 605 0904 & 605 0905, F.S. to determ	ine penalty hab	•					
12001 Science Drive, Ste. 160 5. (Street Address of Principal Office)		6. <u> </u>	1001 O'Malley Cer	ntre Drive, Ste. 204				
(Street Address of )	Principal Office)		(Mailir	ng Address)				
Orlando, FL 32826		A	nchorage, AK 9951					
		_	- · · · · · · · · · · · · · · · · · · ·	100 m				
		_		<u> </u>				
				<del>-</del> .,				
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acc	eptable)	100 mg (100 mg)	<u>မ</u>			
	Corporation Social Company			,				
Name:	Corporation Service Company		<u>.</u>					
	1201 Hays Street							
Office Address:								
	Tallahassee		3230	1				
	(City)		, Florida(2	Cip code)				

#### 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 age 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.

Corporation Service Company

By:

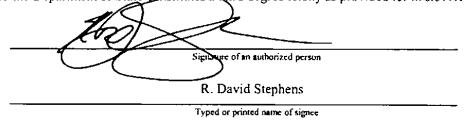
Roxanne Turner

Asst. Vice President

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: R. Shane Harvey Name: R. David Stephens Manager ■ Manager Address: \_ 11001 O'Malley Centre Drive Address: \_\_\_\_\_\_ ■ Member Member Ste. 204 Ste. 204 Authorized Authorized Anchorage, AK 99515 Anchorage, AK 99515 Person Person Other\_\_\_\_\_ Other\_\_\_\_ Other\_\_\_ Other\_\_\_\_ Manager Name: Manager Name: \_\_\_\_ Member Address: Member Address: \_\_Authorized Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ Other Manager Manager Name: Member Address: Address: \_\_\_Authorized Authorized Person Person + Other\_\_\_\_ Other Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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 oa 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.



## 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:

#### Katmai Management Services, LLC

This entity was formed on February 22, 2005 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 June 25, 2019.

Julie Center

Julie Anderson Commissioner