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TO:

Registration Section
Division of Corporations

SUBJECT:	BLM Com	panies, LLC			
		Name of Lin	nited Liability	Company	_
The enclose Existence, a	d "Application by Fore nd check are submitted	rign Limited Liability Compan I to register the above referenc	y for Authoriza ed foreign limi	ation to Transact Business in Florid ted liability company to transact by	la," Certificate of isiness in Florida.
Please return	n all correspondence co	oncerning this matter to the fol	lowing:		
	Christy	Brazeau			
		Name	e of Person		
	BLM Co	ompanies, LLC			
		Firm	/Company		_ _
204 Playa Della Rosita, Suite A					
		Ą	ddress		
	Washin	gton, UT 8478	0		
		City/State	and Zip Code		
	christy.b	razeau@blmc	o.com		
		E-mail address: (to be used for	r future annual	report notification)	_
For further in	nformation concerning	this matter, please call:			
Leisa Moore			435	674-0057 Ext 422	
	Name of	Contact Person	Area Code		
	ALLING ADDRESS:			STREET ADDRESS:	
	stration Section			Division of Corporations Registration Section	
P.O. Box 6327			Clifton Building		
t an	lahassee, FL 32314			2661 Executive Center Circle Tallahassee, FL 32301	
Enc Plea	losed is a check for the ise make check payable	e following amount: e to: FLORIDA DEPARTMI	ENT OF STAT	ГЕ	
	\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status		Filing Fee & S160.00 Filin of Status & C	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: BLM Companies LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, it prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability) 204 Playa Della Rosita, Suite A 204 Playa Della Rosita, Suite A (Street Address of Principal Office) (Mailing Address) Washington, UT 84780 Washington, UT 84780 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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. (Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: **Brent Martin** ✓ Manager Name: Manager Name: 2038 S Great Basin Dr Member Address: Member Address: Washington, UT 84780 ☐ Authorized ☐ Authorized Person Person ☑_{Other_}CEO Other Other __Other_____ Manager Name: Manager | Name: _____ Member Address: ☐ Member Address: _____ Authorized Authorized Person Person Other Other Other_ Other Manager Manager Manager Name: ■ Member Address: ___ Member 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 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. **Brent Martin**

Typed or printed name of signee



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

05/21/2019 7695908-016005212019-475414

CERTIFICATE OF EXISTENCE

Registration Number:

7695908-0160

Business Name:

BLM COMPANIES LLC

Registered Date:

May 19, 2010

Entity Type:

LLC - Domestic

Status:

Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Sym Stup

Jason Sterzer
Director
Division of Corporations and Commercial Code