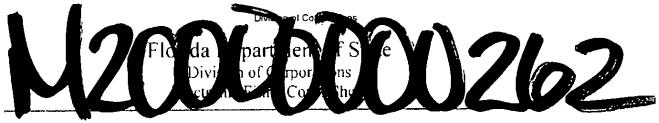
1/6/2020



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (614)280-3338

Fax Number

: (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Foreign Limited Liability Company Olgoonik Solutions, LLC

Certificate of Status	0
Certified Copy	1
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JAN 0 8 2020

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

IN COMPLIANCE WITH NECTION 60x1002, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA Olgoonik Solutions, LLC (Name of Foreign Limited Linking Company; must metade "Limited Liability Company," (A.C.," or "Life") (if cann unstabble, enter alternate come adopted for the purpose of transacting bus ones in Handa The alternate came must neither "Limited I sabilay Crospany," "1.1 (C," or "TLC.") Alaşka (FF: marker, if applicable) Thursdays under the law of which foreign backed bubbles company a capacity; (Date liest impracted brames in Florids, if pear to registration) (See sections 605 0504 & 605 0905, F.S. to determine peaalty liability) 6. 3201 C Street, Suite 700 3201 C Street, Suite 700 (Mariang Address) (Street Address of Principal Office) Anchorage, AK 99503 Anchorage, AK 99503 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation 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. CT Corporation System (/

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]:

Title or Conneity:	Name and Address:	Title or Capacity:		Name and Address:	
Manager	Name: Olgoonik Development, LLC	Manager	Name:		
⊠Member	Address: 3201 C Street, Suite 700	Member	Address:		
Authorized	Anchorage, AK 99503	Authorized			
Person		Person			
Other	Other	[]Other		Other	
Manager	Name:	Manager	Name:		·· ·······
Member	Address:	☐ Member	Address:		
Authorized		Authorized			···-·
Person		Person			
Other	Other	Other		[]Other	* = ***
Manager	Name:	Manager	Name:		67
Member	Address:	☐ Member	Address		
Authorized		Authorized			!
Person		Person			
	Other	Other		Other	Ņ

indexed 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.

> of an abhorical person Robert Ritter Typed is printed more of signer

Alaska Entity #10007286

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.

Olgoonik Solutions, LLC

This entity was formed on September 12, 2012 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.

Mulie Cinterson



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective January 6, 2020.

Commissioner

Julie Anderson