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Certified Copies	Certificates of	Status
Special Instructions to F	iling Officer	

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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE	3/29/21 ORDER	PRIORITY	Routine
المانينية مستمالاتانيا	SIESIET CHEEK	.,	

OUR REF_#_(Order_ID#) Megan

ENTITY

HARWELL CONSULTING LLC

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HARWELL CONSULTING LLC

Please file the attached foreign qualification document.

NOTES:

\$125.00 Authorized

Email address for annual report reminders: joe@thrasherpllc.com

RETURN/FORWARDING INSTRUCTIONS:_

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, March 29th 2021 Page 1 of 1

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

COMPANYTOTRANSACTBU	TION 605.0902_FLORIDA STATUTES, THE FOLLO SINESS INTHE STATE OF FLORIDA: ing_LLC		R A FOREIGN LIMITED LIABILITY
(Name of Foreign	Limited Liability Company; must include "Limited Liabi	hty Company," "L.L.C.," or "LLC")	
(If name unavailable, enter alternate r	name adopted for the purpose of transacting business in Florida 1	he alternate name must include "Limited Lia	bility Company," "L.L.C." or "L.L.C.")
2.		3.	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. (FEI numbe	r, if applicable)
March, 2021			
4.			
1303 #636 361116	•	1909 West Same Man	•
5. (Street Address of Principal Office)		(Mailing Address)	
Suite 236		Suite 236	
Tucson, Arizona	85745	Tucson, Arizona 857	45
7. Name and street addres	s of Florida registered agent: (P.O. Box NO	<u>Γ</u> acceptable)	2021 K
Name:	Incorporating Services, Ltd.		2021 HAR 29 SECRETARY
, , , , , , , , , , , , , , , , , , , ,	1540 Glenway Drive		SE PM
Office Address:	-		
Office Address.	Tallahassee	32301 . Florida	AMID: 02
	(City)	(Zip 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 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 obligation 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]: **Title or Capacity:** Name and Address: Title or Capacity: Name and Address: Dusty Harwell □Manager □ Manager 1505 West Saint Mary's XI Member □ Member Address: _____ Address: Suite 236 □ Authorized □ Authorized Tucson, Arizona 85745 Person Person ____ Other____ □Other____ □Other □Other □Manager □Manager Name: ______ Name: _____ □Member Address: □Member Address: _____ ☐ Authorized □ Authorized Person Person □Other □Other____ □Other ___ □Other____ Name: _____ □Manager Address: _____ □Member Address: _____ _ ☐ Member ☐ Authorized ☐ Authorized Person Person □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.

Typed or printed name of signee

Signature of an authorized person

Joe McDonough, on behalf of Thrasher Law Offices PLLC

Thomas Joseph McDonough





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

HARWELL CONSULTING LLC

ACC file number: 1901831

was incorporated under the laws of the State of Arizona on 09/21/2018, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 03/26/2021

Matthew Neubert, Executive Director



