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ACCOUNT NO. : I2000000195

REFERENCE: 181928 7278977

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : June 18, 2014

ORDER TIME : 1:16 PM

ORDER NO. : 181928-001

CUSTOMER NO: 7278977

#### FOREIGN FILINGS

NAME: HTMS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER:

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

HTMS, INC.			A LL A H
(Enter name of c	orporation; must include "INCORPORATED forp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"	ASSEE . I
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting busin	ness in blorida)
DELAWARE	:	91-2017112	D.E.
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicabl	e)
01/07/2000	5	PERPETUAL	
(Date	of incorporation)	(Duration: Year corp. will cease to exist of	or "perpetual")
<del></del>			<del> </del>
	(Date first transacted business	in Florida if prior to registration)	
9025 Beacon S		1502. F.S., to determine penalty liability)	
9025 Beacon S	(SEE SECTIONS 607.1501 & 607.	1502. F.S., to determine penalty liability)	
· · · · · · · · · · · · · · · · · · ·	(SEE SECTIONS 607.1501 & 607. treet, Vancouver, WA, 98664	1502. F.S., to determine penalty liability)	
· · · · · · · · · · · · · · · · · · ·	(SEE SECTIONS 607.1501 & 607. treet, Vancouver, WA, 98664 (Principal office ad	1502. F.S., to determine penalty liability)  dress)	
9025 Beacon S	(SEE SECTIONS 607.1501 & 607.  treet, Vancouver, WA, 98664  (Principal office adtreet, Vancouver, WA, 98664  (Current mailing add	1502. F.S., to determine penalty liability)  Idress)	
9025 Beacon S	(SEE SECTIONS 607.1501 & 607.  treet, Vancouver, WA, 98664  (Principal office address, Vancouver, WA, 98664  (Current mailing address of Florida registered agent: (P	1502. F.S., to determine penalty liability)  Idress)	
9025 Beacon S	(SEE SECTIONS 607.1501 & 607.  treet, Vancouver, WA, 98664  (Principal office adtreet, Vancouver, WA, 98664  (Current mailing add	1502. F.S., to determine penalty liability)  Idress)	
9025 Beacon S  Name and stree  Name:	(SEE SECTIONS 607.1501 & 607.  treet, Vancouver, WA, 98664  (Principal office address, Vancouver, WA, 98664  (Current mailing address of Florida registered agent: (P	1502. F.S., to determine penalty liability)  Idress)	,
9025 Beacon S  Name and stree	(SEE SECTIONS 607.1501 & 607.  treet, Vancouver, WA, 98664  (Principal office address, Vancouver, WA, 98664  (Current mailing address of Florida registered agent: (P	1502. F.S., to determine penalty liability)  Idress)	

#### 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Corporation Service Company

(Registered agent's ignature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

Asst VP

11. Names and business addresses of officers and/or directors:

A. DIRECTORS	······································
Chairman:	
Address:	ALL S.
	SSE
/ice Chairman:	Mar I
Address:	ORIDA ORIDA
. Tom Kent	
	on Avenue, Vancouver, WA 98664
	·
. OFFICERS	
Tom Kent	
	on Avenue Mancouver MA 98664
ice President:	
ddress:	
OTE: If necessary	, you may attach an addendum to the application listing additional officers and/or directors.
2. Tillen	
The officer or director true and that he o	Signature of Director or Officer or signing this document (and who is listed in number 12 above) affirms that the facts stated herein r she is aware that false information submitted in a document to the Department of State constitutes as provided for in s.817.155, F.S.
3. Tom Kent, Presi	
,	(Typed or printed name and capacity of person signing application)

# Delaware

PAGE

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SECRETARY OF STAT

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HTMS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HTMS, INC."

WAS INCORPORATED ON THE SEVENTH DAY OF JANUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

3156012 8300

140881651

AUTHENTICATION: 1484918

DATE: 06-25-14

You may verify this certificate online at corp.delaware.gov/authver.shtml