E0000002616

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 850-222-1092

800003246758--3; -05/10/00--01049--025 *****78.75 *****78.75

<u>C</u>	orporation(s) Name	<u> </u>
· · · · · · · · · · · · · · · · · · ·	(Ventail Corporation	80 H
()Profit	()Amendment	()Merger 00 70
()Nonprofit ()Foreign ()LLC	()Dissolution	()Mark
()Limited Partnership ()Reinstatement	()Annual Report ()Reservation ()Fictitious Nam	()Ch. RASSIS NO HIE
()Certified Copy	()Photocopies	Vicus 5
(XXX)Walk in	(XXX)Pick-up	()Will Wait
Name Availability: Document Examiner: Updater: Verifier: Acknowledgement:	MAY 10	Please Return Extra Copies File Stamped To: Melanie Strickland
W.P. Verifier:	- 190	Thank You!

3/25/W

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
IN COMPLIANCE WITH SECTION 607.1503, FEORIDA STATE OF FLORIDA. REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
Aventul Corporation " or The Corporation" or
I. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a
words or abbreviations of like import in language as will clearly indicate that it is a so-permanent in an autural person or partnership if not so contained in the name at present.)
2. Washington 3. 77-0423686 (State or country under the law of which it is incorporated) (FEI number, if applicable)
2. (FEI number, if applicable)
(State or country under the law of which it is incorporated) 4. (Duration: Year corp. will cease to exist or "perpetual")
4
(Date of incorporation)
6
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
SDR Housell St ZNO MOOR
7
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 808 Howell St Zno Floor Seattle, WA 98101 (Current mailing address)
(Current mailing address)
8. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
LOMPOTER DERVICES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
A street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: CT Corporation System Name:
Name: C CORPORATION 3731
1700 Smill Ding Island KOAD
Office Address: 1200 500 FW TIME
$P(\lambda_0 + \lambda_1 + \gamma_0)$ Florida.
Office Address: 1200 South Pine Island Road Plantation Florida, (Zip code)
10. 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
Having been named as registered agent and to accept service of process for the above states. I further agree to comply this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply this application are accept the application and accept the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the acceptance of the proper and complete performance of my duties, and I am familiar with a complete performance of my duties.
with the provisions of all statutes reactive to the proper unit company project the obligations of my position as registered agent.
the obligations of my position and of the same
(Registered agent's signature) Jack Caskey, Assistant Vice President
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the
11. Attached is a certificate of existence duly authenticated, not more than 50 days prior to converge the convergence of the law of 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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	24
Director! Even Kaplan	2 (1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Address: ZZ66 NE BBRD	1/2000
Seattle, WA 98115	
DIRECTOR! DAME! Lynch	
Address: 25600 LA Lame Ct	
Los Angeles, CA 94022	The second second
Director: DAVID Pool	- The state of the
Address: 230 Overlake Drive EAst	· · · · · · · · · · · · · · · · · · ·
Rellevue, WA 98004	lighty (1) company
1600E 15Ho NE	
Address: NOTELINE, WA 98177	1 · · · · · · · · · · · · · · · · · · ·
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: EVAN KARIAN	and the second s
Address: 2266 NE 63RD	The state of the s
Seattle, WA 98115	
Vice President: Chris Hopen	Control of the contro
Address: 19805 15th Ave NE	
Shoreline, WA 98177	
Gia Madaa	
Secretary: The NE 63RD	
Address: 6260 11 0000 Sept 18 18 18 18 18 18 18 18 18 18 18 18 18	
Tion Koolan	
Treasurer: CVAV VIII ORD	
Address: CLOS VC 65RD	
WATTE, WIT (DIE)	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	Mark A MARK T.
Vice President	
(Typed or printed name and capacity of person signing application)	<u></u>

STATE of WASHINGTON



SECRETARY of STATE

I, RALPH MUNRO, Secretary of State of the State of Washington and custodian of its seal,

hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

AVENTAIL CORPORATION

I FURTHER CERTIFY that the records on file in this office show that the above named profit corporation was formed under the laws of the State of Washington and was issued a Certificate of Incorporation in Washington on February 15, 2000.

I FURTHER CERTIFY that as of the date of this certificate, no Articles of Dissolution have been filed, and that the corporation is duly authorized to transact business in the corporate form in the State of Washington.



Date: May 1, 2000

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital



200-00