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DIYALION OF CORPORATIO

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: VECO USA, Inc.	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida" "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
CHUCK MARTIN	· · · · · · · · · · · · · · · · · · ·
(Name of Person)	-
VECO USA, Inc. (Firm/Company)) 2
(Firm/Company)	2 x
9000 E NICHOLS AVE. #250	ELLED 1:35
(Address)	TO KE
9000 E. NICHOLS AVE. #250 (Address) CENTENNIAL, CO 80112 (City/State and Zip code)	名子し
(City/State and Zip code)	32 3
For further information concerning this matter, please call:	COAS.
CHUCK MARTIN at (303) 268-3417	
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
☐ \$70.00 Filing Fee \$\frac{1}{2}\$	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. YECO USA INC.	
(Name of corporation; must include the word "TNCORPORATED", "COMPANY", "C	CORPORATION" or
words or abbreviations of like import in language as will clearly indicate that it is a cor	poration instead of a
natural person or partnership if not so contained in the name at present.)	
- COLORADO	1 0 M
2. COLORADO (State or country under the law of which it is incorporated) (FEI number of the law of which it is incorporated)	unber, if applicable)
(State or country under the law of which it is incorporated) (FEI nu	umber, if applicable)
4. <u>FEB. 1, 1993</u> 5. <u>FER PE7</u> (Date of incorporation) Couration: Year corp.	corporation" or poration instead of a mber, if applicable) Z/AL will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp.	will cease to exist or "perpetual")
6. LIPON QUALIFICATION	OF E
(Date first transacted business in Florida. If corporation has not transacted business in F	Torida insert "upon qualification")
(SEE SECTIONS 607.1501, 607.1502 and 817.155.	, F.S.)
	•
7. YOOO E. NICHOLS AVE., "250 ; CENTENI	VIAL, CO 80112
7. 9000 E. NICHOLS AVE., *250 CENTENI (Principal office address)	:
(Principal office address) 9000 E. NICHOLS AVE. #250: CENTENNII (Current mailing address)	BL. CA 80112
(Current mailing address)	
, , , , , , , , , , , , , , , , , , ,	
of the block of	
8. ENGINEERING	
(Purpose(s) of corporation authorized in home state or country to be carried out in	state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Dr	Day NOT acceptable
5. Name and street address of Piorida registered agent: (P.O. DOX Of Mail DR	op Box MOT acceptable)
Name: <u>CT CORPORATION SYSTEM</u>	
The state of the s	•
Office Address: 1200 S PINE ISLAND RD	
<u>PLANTATION</u> , Florida 333. (City) (Zip o	24
(City) (Zip o	oode)
•	·
0. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process for the a	bove stated corporation at the place
lesignated in this application, I hereby accept the appointment as registered agei	nt and agree to act in this capacity. I
urther agree to comply with the provisions of all statutes relative to the proper a	nd complete performance of my
luties, and I am familiar with and accept the obligations of my position as regist	ered agent.
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- Children and a single	**
(Registered agent's signature)	;

11. 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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: SEE ATTACHED Address: _____ Vice Chairman: Address: ____ Director: Address: ____ Address: ____ B. OFFICERS President: SEE ATTACHED Address: ___ Vice President: Address: Secretary: Address: ____ Treasurer: Address: _____

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)

Committee of containing of the containing of the

WILLIAM HARRING TOW, VICE PRESIDENT
(Typed or printed name and capacity of person signing application)

VECO USA, INC. **DIRECTORS**

Pete Leathard

3601 C Street, #1000 Anchorage, AK 99503 907-264-8104

Ken Marzocco

Director

Director

1313 Bay Street Bellingham, WA 98225

360-676-1500

Director

Jerry Lilleston 1313 Bay Street Bellingham, WA 98225

360-676-1500

VECO USA, INC. OFFICERS

Ken Marzocco 1313 Bay St Bellingham, WA 360-676-1500	President 98225	
Pat Hudgens 1313 Bay St Bellingham, WA 360-676-1500	Vice President 98225	_
Bill Harrington 9000 E. Nichols A Englewood, CO 303-268-3421		٠ ١ ٠
Randall Connett 9000 E. Nichols A Englewood, CO 303-268-3499		 ; ;
Jerry Lilleston 1313 Bay St Bellingham, WA 360-676-1500	Secretary/Treasurer 98225	.:
Richard Cervany 9000 E. Nichols A Englewood, CO 303-268-3472	•	urer

VECO USA, Inc. is 100% owned by VECO Services, Inc.





STATE OF COLORADO

DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

VECO USA, INC. (Colorado CORPORATION) File # 19931011256

was filed in this office on February 1, 1993 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: October 13, 2003

For Validation:

Certificate ID: 717220

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

SECRETARY OF STATE