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FILED  
2005 APR 11 AM 9:00  
J. BRYAN CORPORATION  
TALLAHASSEE, FLORIDA

W05-14465  
J. BRYAN MAR 21 2005

J. BRYAN APR 12 2005

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Zones Corporate Solutions, 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:

Jeff Kidwell

(Name of Person)

Zones Corporate Solutions, Inc.

(Firm/Company)

1102 15th St SW - Suite 254

(Address)

Auburn, WA 98001

(City/State and Zip code)

For further information concerning this matter, please call:

Jeff Kidwell

(Name of Person)

at ( 253 ) 205-3138

(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

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

FILED  
2005 APR 11 AM 9:00  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

March 21, 2005

JEFF KIDWELL  
ZONES CORPORATE SOLUTIONS, INC.  
1102 15TH ST SW - SUITE 254  
AUBURN, WA 98001

SUBJECT: ZONES CORPORATE SOLUTIONS, INC.  
Ref. Number: W05000014465

FILED  
2005 APR 11 AM 9:00  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for ZONES CORPORATE SOLUTIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

-The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 205A00019043

COMPLETE  
Thanks

**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. Zones Corporate Solutions, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. Washington** **3. 04-3701095**

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

**4. 2/8/2002** **5. Perpetual**

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

**6. 4/1/2005**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 1102 15th St SW - Suite 254, Auburn, WA 98001**

(Principal office address)

**1102 15th St SW - Suite 254, Auburn, WA 98001**

(Current mailing address)

**8. Resell computer hardware, software and associated equipment; including computer services.**

(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 NOT acceptable)**

Name: **C T Corporation System**

Office Address: **1200 South Pine Island Road**

**Plantation**, Florida **33324**

(City)

(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 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.*

By:

C T Corporation System

(Registered agent's signature)

**JACK CASKEY**

**ASST. V. P.**

**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:**

FILED  
2005 APR 11 AM 9:00  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: Firoz Lalji

Address: 78 Cascade Key

Bellevue, WA 98006

Vice Chairman: (Director) Ronald McFadden

Address: 8450 SE 47th PL

Mercer Island, WA 98040

Director: Patrick Sean Hobday

Address: 122 140th Ave SE

Lake Stevens, WA 98258

Director: Christina Corley

Address: 1252 N Yale Ave

Arlington Heights, IL 60004

**B. OFFICERS**

President: Firoz Lalji

Address: 78 Cascade Key

Bellevue, WA 98006

Vice President: Patrick Sean Hobday

Address: 122 140th Ave SE

Lake Stevens, WA 98258

Secretary: (Vice President) Christina Corley

Address: 1252 N Yale Ave, Arlington Heights, IL 60004

Treasurer: Ronald McFadden

Address: 8450 SE 47th PL, Mercer Island, WA 98040

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Ronald McFadden

(Typed or printed name and capacity of person signing application)

FILED  
2005 APR 11 AM 9:00  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

**The State of Washington**

**Secretary of State**

I, **SAM REED**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

**CERTIFICATE OF EXISTENCE/AUTHORIZATION**

**OF**

**ZONES CORPORATE SOLUTIONS, INC.**

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 WA and was issued a Certificate Of Incorporation in Washington on 2/8/2002.

I **FURTHER CERTIFY** that as of the date of this certificate, ZONES CORPORATE SOLUTIONS, INC. remains active and has complied with the filing requirements of this office.

Date: March 8, 2005

UBI: 602-180-843



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

*Sam Reed*

Sam Reed, Secretary of State

FILED  
2005 APR 11 AM 9:00  
OFFICE OF CORPORATIONS  
TALLAHASSEE, FLORIDA