

Florida Department of State

Division of Corporations Public Access System

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FOREIGN PROFIT NONPROFIT CORPORATION

SPEAKEASY, INC.

Certificate of Status	0
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7/6/2007

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

		BUSINESS IN THE STATE OF FLORIDA.
, SPEAKEASY, INC		\$ C.
	ration; must include "INCORPORATED, "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
	ASHINGTON, INC.	· · · · · · · · · · · · · · · · · · ·
(If name unavailable i	n Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
2. WASHINGTON	3.	91-1661095
(State or country unde	r the law of which it is incorporated)	(FEI number, if applicable)
4. 10/21/1994	5.	PERPETUAL
(Date of in	(corporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		· · · · · · · · · · · · · · · · · · ·
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)
7. 1201 WESTERN AV	ENUE, SUITE 700, SEATTLE, WA 981	
00 003/03/0 4 779	(Principal office add	iress)
PO BOX 9312 ATTI	N TAX, MINNEAPOLIS, MN 55440	
	(Current mailing add	iress)
ð	ernet service provider and vo	
(Purpose(s) of	corporation authorized in home state or c	ountry to be carried out in state of Florida)
9. Name and street add	dress of Florida registered agent: (P.0	O. Box NOT acceptable)
Name:	C T Corporation System	
Office Address:	1200 South Pine Island Road	
	Plantation	Florids 33324
	(City)	(Zip code)
designated in this app further agree to comp	s registered agent and to accept serv. lication, I hereby accept the appoint ly with the provisions of all statutes to and accept the obligations of my po	ice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my dutics, osition as registered agent.
ву: 🗸	CT Corporation System	Michele Miller ssistant Secretary
	(Registered agent's signature	sistant Secretary
the Department of Statunder the law of which	e, by the Secretary of State or other o	, not more than 90 days prior to delivery of this application to afficial having custody of corporate records in the jurisdiction on:
PLEST - NEW MARKET System C	Deline	
		H07000174702

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BEST BUY

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12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	707
	TO SEE
Vice Chairman:	705 0
Address;	AG E
	70, 7
Director:	
Address:	
Director:	
Address:	
	
B. OFFICERS	
President: Bruce A. Chatterley	
Address: 1201 Western Avenue, Suite 700, Seattle, WA 98101	
Address: 1201 Woodoff World Good Good Good Good Good Good Good Go	
Vice President:	
Address:	
Secretary: Andrew F. Hyde	,
• • • • • • • • • • • • • • • • • • • •	
Address: 1201 Western Avenue, Suite 700, Seattle, WA 98101	
Treasurer:	
Address:	
NOTE: If proceeding they may about an existing to the analysis limited with the	
NOTE: If necessary, you may argen an articular to the application listing additional officers and	or airectors,
(Signature of Director or Officer listed in number 12 of the application)	
14. Bruce A. Chatterley, Product	
(Typed or printed name and capacity of person signing application)	



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

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF SPEAKEASY, INC.

1 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 10/21/1994.

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

Date: June 19, 2007

UBI: 601-584-092



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

Sam Reed, Secretary of State

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