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### FOREIGN PROFIT/NONPROFIT CORPORATION

Harvest Management Services Corp.

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## 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.

(If name unavai	able in Florida, enter alternate corporate	e namé	adopted for t	he purpose of transacting b	usiness in Florida)
Washington			86-0193657		
(State or country	under the law of which it is incorporate	<b>X</b> ()		(FEI number, if applica	ble)
05/16/2007		5.	Perponial	W	
(Date	of incorporation)		(Duration:	Year corp. will cease to ex	st or "perpetual")
07/01/2007	(Date first transacted bus (SEE SECTIONS 607.1501 &	607.1			
6715 NE 63rd S	t STE 468, Vancouver, WA 98661-198				500
	(Principal offi	ice add	ress)		EG
<u>apune</u>	(Current maili	20 24	PANN)	· · · · · · · · · · · · · · · · · · ·	——————————————————————————————————————
	(Curen man	mR mac	1633)		SS = .
					m <sub>o</sub>
	ners of retirement residences.  i) of corporation authorized in home ata	h 05 0	umber to be es	erried out in state of Blorids	TO TO
	r address of Florida registered agent				ORIDA
Name:	C T Corporation System	·			
ice Address:	1200 South Pine Island Road				
	•			1 mmon4	
	Plentation (City)		, , Floric	la <u>33324</u> (Zip code)	
	(0.5)			(mily decory)	
ving been nam Ignated in this ther agree to c	ent's acceptance; ed as registered agent and to accept application, I kereby accept the ap- omply with the provisions of all stat with and accept the obligations of a C T Corporation System	politin Hies n	eent as regis clative to the	tered agent and agree to proper and complete po	act in this capacity.

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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:

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07 JUL 18 AMII: 31

A. DIK	RECTORS	
Chairman	Daniel R. Bary SECRETARY OF	STATE
Address:	SS: 3131 Elliot Ave STB 500	_ORIDA
	Seattle, WA 98121	
Vice Chai	hairman:	
Address:	:8:	
Director:	or: Norman L. Brenden	
Address:	18; 6715 NE 63rd St STE 468	
	Vancouver WA 98661	
Director:	r: Patrick F. Kennedy	
Address:	ss: 600 University St STE 2500	
	Scattle WA 98101	<del></del>
B. OFFI	FICERS SEE ATTACHMENT	
President:	nt: Norman L. Brenden	
Address:	s: 6715 NE 63rd St STE 468	·
	Vancouver, WA 98661-1980	
Vice.Presi	resident: Bruce D. Thorn	
Address:	s: 6715 NE 63rd St STE 468	
,	Vancouver, WA 98661-1980	
Socretary:	ry: Bruce D. Thorn	
Address:	s: 6715 NE 63rd St STE 468, Vancouver, WA 98661-1980	
Treasurer:	er: Susan L. Haider	
Address:	8: 6715 NE 63rd St STE 468, Vancouver, WA 98661-1980	
NOTE:	: If necessary, you may attach an addendum to the application listing additional officers an	d/or directors.
	(Signature of Director or Officer listed in number 12 of the application)	
14. <u>Bruce</u>	uce D. Thorn, Vice President  (Typed or printed name and capacity of person signing application)	
	\	

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### Attachment to Florida Officers & Directors

Fuli Name:

Officer/Director: Officer, Director

Officer's Title: Chairman

Director's Title: Chairman

Business Address: 3131 Elliot Ave STE 500

Daniel R. Baty

City: Seattle
State: WA
ZIP Code: 98121

2 Full Name: Patrick F. Kennedy

Officer/Director: Officer,Director

Officer's Title: CEO

Director's Title: Other Director

Business Address: 600 University St STE 2500

City: Seattle
State: WA
ZIP Code: 98101

3 Full Name: Judee A. Wells

Officer/Director: Officer

Officer's Title: Assistant Socretary

Director's Title:

Business Address: 1111 3rd Ave 34th Fir

City: Seattle State: WA ZIP Code: 98101

4 Full Name: Norman L. Brenden

Officer/Director: Officer, Director

Officer's Title: President
Director's Title: Director

Business Address: 6715 NE 63rd St STE 468

City: Vancouver
State: WA

ZIP Code: 98661-1980





# 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

#### HARVEST MANAGEMENT SERVICES CORP.

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 5/16/2007.

I FURTHER CERTIFY that as of the date of this certificate, HARVEST MANAGEMENT SERVICES CORP. remains active and has complied with the filing requirements of this office.

Date: July 16, 2007

UBI: 602-726-597



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

Sem Reed, Secretary of State