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COVER LETTER

TO: New Filing Section Division of Corporations							
SUBJECT: Safe Harbor Technology Corporation							
Dear Sir or Madam:							
The enclosed "Application by Foreign Corporation for Authorization to Transact Busines "Certificate of Existence," and check are submitted to register the above referenced foreign transact business in Florida.							
Please return all correspondence concerning this matter to the following:							
Laure 1 Gon	**************************************						
(Name of Person)							
Safe Harbor Technology Corporation (Firm/Company)							
(Firm/Company)							
150 Technology Lane #5-1 (Address)							
	-						
Elma, WA 98541-9155 (City/State and Zip code)	ALL SE						
(City/State and Zip code)	AR K						
For further information concerning this matter, please call:	ETARY OF HASSEE. F						
Laurel Gon at (206) 755-8924							
Lawel Gon at (206) 755-8924 (Area Code & Daytime Telephone Numb	(2 전 전 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2						
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STREET/COURIER ADDRESS: MAILING ADDRESS:	}						
New Filing Section Division of Corporations New Filing Section Division of Corporations	•						
Clifton Building P.O. Box 6327	,						
2661 Executive Center Circle Tallahassee, FL 32314							
Tallahassee, FL 32301							
Enclosed is a check for the following amount:							
Certificate of Status Certified Copy Cert	0 Filing Fee, ificate of Status & ified Copy						

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2008

LAURE GON
150 TECHNOLOGY LANE, #S-1
ELMA, WA 98541-9155

SUBJECT: SAFEHARBOR TECHNOLOGY CORPORATION

Ref. Number: W08000038644

We have received your document for SAFEHARBOR TECHNOLOGY CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

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) 245-6047.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 908A00046372

Division of Compositions P.O. POV 6997 Tollahousee Florida 9991

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. Safe Harbor Technology Corporation
(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 State
(State or country under the law of which it is incorporated)

4. 4/20/1998
(Date of incorporation)

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

	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		•
7.,	150 Technology Lane # S-1, Elma, WA 98541-9155		
	(Principal office address) Same us above	SEC	7008
	(Current mailing address)	AETA	SEP
8.	sales to new clients of technology services	ARY	5
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	PF S	U
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	STA	Ų
		57	S

Name:

Office Address:

14615 Loridown Drive

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.

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: Brian Vincent			
Address: 150 Tech nology Lane #5-1			
Elma, WA 98541-9155			
Vice Chairman:			
Address:			
Director:			
Address:			
	····		
Director:			
Address:			
B. OFFICERS	SECF	2003	711
President:	AT 33	SEP	######################################
Address:	SEE	5	m
	- E'A	<u>ט</u>	O
Vice President:	ORIO ORIO	بب _ <u>بب</u>	· .
Address:			
Secretary: Gregory Clark			
Address: 150 Technology Lane #5-1 Elma, WA 98155			
Treasurer:			
Address:			
NOTE: If necessary you may attach an addendum to the application listing additional officers ar	id/or dire	ctors.	
13. // (Signature of Director or Officer listed in number 12 of the application)			
13. Step (Who (Signature of Director or Officer listed in number 12 of the application) 14. Gregory J. Clark VP of Fynance 4. Admin (Typed or printed name and capacity of person signing application)			
(Typed or printed name and capacity of person signing application)			



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

SAFEHARBOR TECHNOLOGY 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 WA and was issued a Certificate Of Incorporation in Washington on 4/20/1998.

TENTHER CERTIFY that as of the date of this certificate, SAFEHARBOR FETHNGLODY CORPORATION remains active and has complied with the filing requirements of this office

Date: August 1, 2008

UBI: 601-870-519

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

Sam Reed, Secretary of State