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### COVER LETTER

Staff San On Staff . TO: New Filing Section Division of Corporations SUBJECT: Dye Management Group, 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: Jolene Martin Name of Person Dye Management Group, Inc. Firm/Company 500 - 108th Avenue NE, Suite 1700 Address Bellevue, WA 98004 City/State and Zip code imartin@dvemanagement.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: April Asbury Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section **New Filing Section Division of Corporations** 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: **✓** \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee,

Certified Copy

Certificate of Status &

Certified Copy

Certificate of Status

## 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. Dye Manage	ement Group, Inc.					
	orporation; must include "INCORPORATI forp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATIO	N,"		
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transaction	ng business	in Flo	rida)
2. Washington		3.	91-148-2332			
(State or country	under the law of which it is incorporated)	•	(FEI number, if app	olicable)		-
4. 5/9/1990		5.	Perpetual			
(Date of incorporation) (Duration: Year corp. will cease to e		o exist or "	perpetu	al")		
6. N/A						
	•		n Florida, if prior to registration) 502, F.S., to determine penalty liabil	ity)		
7. 500 - 108th A	Avenue NE, Suite 1700, Bellevue	, V	VA 98004			
	(Principal office	add	ress)			
500 - 108th A	Avenue NE, Suite 1700, Bellevue	, V	VA 98004			
	(Current mailing					<del></del>
· · · · · · · · · · · · · · · · · · ·	on management consultants		FDI COLOR	:1-1		
(Purpose(s	s) of corporation authorized in home state o	rcc	ountry to be carried out in state of ric	orida)	<u></u>	
9. Name and stree	et address of Florida registered agent: (	P.C	D. Box NOT acceptable)	E CO	7009	- Designation of the last of t
Name:	CT Corporation System			HAS	AU6	
Office Address:	1200 South Pine Island Road			RY 0	2u	
·	Plantation		, Florida 33324	E 3	U	
	(City)		(Zip code)	ATE RID		
				1	<b>(a)</b>	•

#### 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.

(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: \_\_\_\_\_ Address: Vice Chairman: Address: \_\_ Address: \_ **B. OFFICERS** President: William D. Dye Address: 500 - 108th Avenue NE, Suite 1700, Bellevue, WA 98004 Vice President: Address: \_\_ Address: Treasurer: Kathy Dye Address: 500 - 108th Avenue NE, Suite 1700, Bellevue, WA 98004 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. William D. Dye

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

DYE MANAGEMENT GROUP, 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

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

Incorporation in Washington on 5/9/1990.

Date: August 12, 2009

UBI: 601-248-208

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

Sam Reed, Secretary of State

