Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

Prom:

Account Name : C T CORFORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Pasi 1	X = 1 = 1 = 1 = 1					
CMUTT	Address:					

FOREIGN PROFIT/NONPROFIT CORPORATION Talyst Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$1,470.00

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: T-ALYST 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," or "Certificate of Good Standing" 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:
VIVIAN LE
Name of Person
TALYST, INC
Firm/Company
18555.SE_36th St. Ste#150
Address
Bellevie WA 98006
City/State and Zip code
City/State and Zip code Accounting etalyst. com E-mail address: (to be used for future annual report notification)
H-mail address: (to be used for future annual report nouncation)
For further information concerning this matter, please call:
Vivian te a (425) 289 - 5756
VIVIAN He at (425) 289 - 5756 Name of Person Area Code & Deytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee Certificate of Status S78.75 Filing Fee & Certificate of Status Certified Copy S87.50 Filing Fee, Certified Copy Ce

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

IN COMPLIANCE WITH SECTION 607. ISO3, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

						₹.o.
name unavai	able in Florida, enter alternate corporate na	mo i	idented for the num	pose of transe	cting business in	Florida
	>€	•	· ·	="	_	ASS.
ate or country under the law of which it is incorporated)			75-3054716 (FEI number, if applicable)			<u> </u>
May 02, 2007 (Date of incorporation)			00	19etuo		<u>"</u> 完
				uration: Year corp. will cease to exist or "per		
	Nov. 12004					
	(Date first transacted busine	su in	Florida, if prior to	registration)	1 44.	
اس م	(SEE SECTIONS 607.1501 & 60 5 S-E 36+h S+.		12, F.S., to delearni 1			980
1355	Crincipal office			, Den	EVAL VO	
	frugerhar office	ROGE	-38 /			
	(Current mailing	addr	cas)			
Mad	Teation Management	<u> </u>				
	of corporation authorized in home state of		intry to be carried i	out in state of	Florida)	
•	•		•		, ,	
ue suo <u>suc</u> e	et address of Florida registered agent: (P.O	Box NOT accer	otable)		
Name: CT Corporation System						
Address:	1200 South Pine Island Road					
	Pinutution		. Florida	33324 (ip code)		
	·		, a 10tting			

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.

> C T Corporation System (Registered agent's nignature)

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,



10 MAR 12 PM 12: 38

	10 HAR 12 TIME 30
12. Names and business addresses of officers and/or directors:	AFONETANG OF STATE
A. DIRECTORS	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Chairman: SEE ATTACHMENT	
Address:	
Vice Chairman:	
Address:	
Director.	
Address:	
Director:	
Address:	
Wildow CED: CARLA CORKERN	
Address: 1355 SE 36th St. S	
Bellevie WA 98006	
VICO-Prostuenc VP Salos 1 RON STRANDIN	
address: 13555 SE 36th St. S-	te # 150
Bellovue WA 98006	
existary;	·
ddress:	
ressurer:	
address:	
OTE: If necessary for may attach an addendum to the application listing ad	- -
3.	3_1L1D
(Signature of Director or Officer listed in number 12 of a 4. CARLA CORKERN CED	he application)
4. (Typed or printed name and capacity of person signing	annication)

APPHOVED AND FILED

10 MAR 12 PM 12: 38

TALLAHASSEE, FLORIDA

TALYST, INC.

BOARD OF DIRECTORS

NAME

ADDRESS

CARLA CORKERN LUCINDA STEWARD RICHARD FADE ELLIOT HAYES BILLIE ELLIS LONNIE EDELHEIT

PAM ROMAS

RON STRANDIN

13555 SE 36TH ST., #150, BELLEVUE, WA 98006 13555 SE 36TH ST., #150, BELLEVUE, WA 98006

13555 SE 36TH ST., #150, BELLEVUE, WA 98006

OFFICERS

NAME TITLE ADDRESS

CARLA CORKERN CEO 13555 SE 36TH ST., #150, BELLEVUE, WA 98006

VP SALES



10 MAR 12 PM 12: 38

Delaware SECRETARY OF STATE TALLARMAN DE STATE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TALYST INC." IS DULY INCORPORATED Under the laws of the state of delaware and is in good standing AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF MARCH, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

8300

100274944

AUTHENTICATION: 7866431

DATE: 03-12-10