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(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Kuichak Marine Industries, 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:
Timothy Rizzo Name of Person
Kurchak Marine Industries, Inc. Firm/Company
469 NW Bowdoin Place Address
Seattle, WA 93107 City/State and Zip code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mark (oralnick at (206) 816-6630 Name of Person Area Code & Daytime 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 □ \$78.75 Filing Fee & Certificate of Status □ \$78.75 Filing Fee & Certificate of Status Certified Copy □ \$78.75 Filing Fee & Certificate of Status & Certified Copy □ \$78.75 Filing Fee & Certified Copy □ \$78.75 Fi

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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "lnc.," "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 or country under the law of which it is incorporated)
(State or country under the law of which it is incorporated)
(FEI number, if applicable) (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) Nu Boudoin Place Seattle, WA
(Principal office address) (Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Northwest Registered Agent LLC Name: 3111 W. Dr. MLK Blvd., STE 100-B180 Office Address: Tampa 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. Dan Keen-Manager (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:	Las I Las Care
A. DIRECTORS	
Chairman:	11 APR 25 PM 12: 53
Address:	SECRETARY OF STATE TALL AHASSEE FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS President: Veith A Whitemore Address: 201 Lk washington Blud	
Vice President: Brian C Thomas	
Address: 10650 NB 9th #202	7 Bellevue, WA 9800
Secretary: James B meckley Address: 18025 NE 136th Redmand	WA 98052
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of	of the application)
(Typed or printed name and capacity of person sign	200

The State of



Washington

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

KVICHAK MARINE INDUSTRIES, 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

Incorporation in Washington on 11/24/1987.

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

Date: April 14, 2011

UBI: 601-056-964

STATE OF WASHINGTON 1889 NO.

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

Sam Reed, Secretary of State