

F1200 0004255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

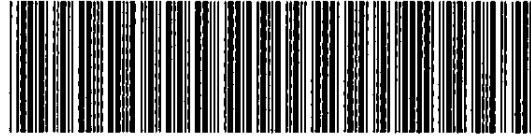
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Mount Whitney Consulting Corp.

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:

Tamara Burton

Name of Person

U.S. Corporation Services, Inc.

Firm/Company

2200 B Douglas Blvd., Suite 100

Address

Roseville, CA 95661

City/State and Zip code

tamara@uscorporation.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tamara Burton

Name of Person

at ( 800 ) 352-0533

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 & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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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.*

1. Mount Whitney Consulting Corp.  
(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. Oregon 3. 30-0533127  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/29/2009 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 391 N.W. 179th Avenue, Beaverton, Oregon 97006  
(Principal office address)

2200 B Douglas Blvd., Suite 100, Roseville, CA 95661  
(Current mailing address)

8. To engage in any business or activity not forbidden by law or by the Articles of Incorporation.  
(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)

Name: William B. Halverson

Office Address: 411 Cleveland Street, Ste 244

Clearwater, Florida 33755  
(City) (Zip code)


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**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: \_\_\_\_\_

Director: Mari Northup

Address: 2200 B Douglas Blvd., Suite 100

Roseville, CA 95661

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Mari Northup

Address: 2200 B Douglas Blvd., Suite 100

Roseville, CA 95661

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Mari Northup

Address: 2200 B Douglas Blvd., Suite 100, Roseville, CA 95661

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Mari Northup

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Mari Northup, President

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

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TALLAHASSEE FLORIDA



CERTIFICATE

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

**MOUNT WHITNEY CONSULTING CORP.**

was

incorporated

under the Oregon

**Business Corporation Act**

on

**April 29, 2009**

and is active on the records of the Corporation Division as of  
the date of this certificate.

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TALLAHASSEE FLORIDA



*In Testimony Whereof, I have hereunto set  
my hand and affixed hereto the Seal of the  
State of Oregon.*

A handwritten signature in black ink, appearing to read "Kate Brown", is written over a horizontal line.

KATE BROWN, Secretary of State

October 10, 2012