F 1200005144

	equestor's Name)		
PROTINGENT 16650 NE 79TH STREET SUITE 200 REDMOND, WA 98052			
(Ci	ty/State/Zip/Phon	e #)	
PICK-UP	WAIT	MAIL	
<u>.</u> (Ві	ısiness Entity Naı	me)	
(Do	ocument Number))	
Certified Copies	_ Certificate:	s of Status	
Special Instructions to	Filing Officer		
Office Use Only			



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a per on PH 4: 03

647-W1200060549



COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: PROTINGENT, INC.	dba Protingent Staffing		
	ration - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporatio "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by	d Standing" and check are submitted to register		
Please return all correspondence concerning this r	matter to the following:		
CAROL HARVEY			
Nar	ne of Person		
Protingent, Inc.			
Firm	n/Company		
16650 NE 79th St. Suite 200			
	Address		
REDMOND, WASHINGTON 9805	52	•	
City/S	State and Zip code		
carol@protingent.com			
E-mail address: (to be	used for future annual report notification)		
For further information concerning this matter, ple	ease call:		
Frank Hornung at (42	25 ₎ 284-777		
	Area Code & Daytime Telephone Number	_	<u></u>
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	12 DEC 20 PH 4: 03	ALE S JO A STORY OF STATE
Enclosed is a check for the following amount:			S
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status		e of Stat	



Division of Corporations

December 5, 2012

CAROL HARVEY 16650 NE 79TH STREET SUITE 200 REDMOND, WA 98052

SUBJECT: PROTINGENT, INC. Ref. Number: W12000060549

We have received your document for PROTINGENT, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Please accept our apology for failing to mention this in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 412A00028877

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 21, 2012

FRANK HORNUNG 16650 NE 79TH ST #200 REDMOND, WA 98052

SUBJECT: PROTINGENT INC Ref. Number: W12000055997

We have received your document for PROTINGENT INC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6052.

Diane Cushing
Regulatory Specialist II Supervisor

Letter Number: 412A00028016



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2012

CAROL HARVEY 16650 NE 79TH ST STE 200 REDMOND, WA 98052

SUBJECT: PROTINGENT INC Ref. Number: W12000055997

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

Returning document per your request.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II

Letter Number: 212A00026952

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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. PROTINGENT, INC.		
(Enter name of corporation: must include "INCORPORAT "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.")	'ED," "COMPANY," "CORPORATION,"	
(If name unavailable in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)	
2. WASHINGTON	3. 27-0030296	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
4. 08/30/2002	5. PERPETUAL	
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6.		
(Date first transacted busine	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	
7.16650 NE 79th St. Suite 200		
(Principal office	address)	
REDMOND, WA 98052		
(Current mailing	address)	
8. Engineering Staffing Corporation		
(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)	
G T A. Man 15 and 5 and 5		
Name: C. CERIORATION SISTEM		
OSE AND LOVE SOUTH LINE SIAND KA		
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
(City)	(Zip code) 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
10. Registered agent's acceptance:	S S	
	service of process for the above stated corporation at the place	
	vintment as registered agent and agree to act in this capacity. I tes relative to the proper and complete performance of my dutie	
and I am familiar with and accept the obligations of m		
C T Corporation System		
BY:	Troy Toland, Asst Secretary	
(Registered agent's signat	ture)	
11. Attached is a certificate of existence duly authentica	ited, 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	BECOME TARY OF SPATE
Chairman:	
Address:	12 DEC 20 PM 4: 03
- <u></u>	
Vice Chairman:	
Address:	
Director:	
Address:	
	· · · · · · · · · · · · · · · · · · ·
Director:	
Address:	
B. OFFICERS	
President: Donn T. Harvey	
Address: 16650 NE 79th Street # 200	
Redmond, Wa. 98052	
Vice President: Tim Bruce	
Address: 16650 NE 79th Street #200	
Redmond, WA	
Secretary:	
Address:	
Treasurer: Carol Harvey	
Address: 16650 NE 79th Street # 200 Redmond, WA 980)52
NOTE: If necessary, you may attach an addendum to the application	a listing additional officers and/or directors.
13.	•
Signature of Director or C The officer or director signing this document (and who is listed in nu are true and that he or she is aware that false information submitted in third degree felony as provided for in s.817.155, F.S.	mber 12 above) affirms that the facts stated herein
14. Donn T. Harvey President	/s/
(Typed or printed name and capacity of pers	on signing application)

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 PROTINGENT, 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 8/30/2002.

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

Date: December 12, 2012

UBI: 602-230-718

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

Sam Reed, Secretary of State

