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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
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SECRETARY OF STATE VISION OF CORPORATIONS

John 12 14393

COVER LETTER

TO:	New Filing Sec Division of Cor				
SUBJ	ECT: Hang	out Corpo	ration		
		Name	of corporation	on - must include suffi	x
Dear S	Sir or Madam:				
"Certi		e," or "Certificate	e of Good St	anding" and check are	ensact Business in Florida," submitted to register the
Please	return all corresp	ondence concern	ing this mat	er to the following:	
Chi	ma A. Nwa	ala			
			Name o	of Person	
Har	ngout Corp	oration	_		
			Firm/Co	mpany	
461	6 25th Av	e NE, Ste	46		
			Ado	tress	
Sea	attle, WA 9	8105			
			City/State	and Zip code	
info	@hangouto				
		E-mail addres	s: (to be use	for future annual rep	ort notification)
For fu	rther information	concerning this r	natter, please	e call:	
Oh:	A Ni	مام	206	449 6204	
Cni	ma A. Nwa		at (206	418-6204 a Code & Daytime Tel	T N 1
	Name of Perso	n	Are	a Code & Daytime Tel	ephone Number
	STREET/COU	IRIER ADDRES	SS:	MAILING	G ADDRESS:
New Filing Section			New Filing Section		
Division of Corporations Clifton Building			Division of Corporations P.O. Box 6327		
	2661 Executive	Center Circle			e, FL 32314
	Tallahassee, FL	. 32301			
Enclos	sed is a check for	the following am	ount:		
= \$7	0.00 Filing Fee	□ \$78.75 Filir Certificate		□ \$78.75 Filing Fee Certified Copy	& S87.50 Filing Fee, Certificate of Status & Certified Copy

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.

Washing	ton	ame adopted for the purpose of transacting business in Florida 3.	,
	under the law of which it is incorporated)	(FEI number, if applicable)	
	er 02, 1996	_{5.} Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
		ess in Florida, if prior to registration)	
	•	07.1502, F.S., to determine penalty liability)	
4616 25th	Ave NE Ste 46 Seattle,		
4040 054	(Principal office		
4616 2510	Ave NE Ste 46 Seattle, \(\) (Current mailing		_
TOUI LOC	ate investments; lease, r	ent option interest in real properties	; .
(Purpose(s	et address of Florida registered agent:	ent option interest in real properties or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	
(Purpose(s	et address of Florida registered agent: Chima A. Nwala	or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	13 AUG -6
(Purpose(s) Name and street Name:	et address of Florida registered agent:	or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	13 AUG -6
(Purpose(s) Name and street Name:	et address of Florida registered agent: Chima A. Nwala	or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	13 AUG -6
(Purpose(s Name and <u>street</u> Name: ffice Address:	c) of corporation authorized in home state of et address of Florida registered agent: Chima A. Nwala 4201 Trumpworth CT Valrico (City)	or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	9- 90H C.
(Purpose(s Name and stree Name: ffice Address: O. Registered aving been namesignated in this rther agree to c	c) of corporation authorized in home state of et address of Florida registered agent: Chima A. Nwala 4201 Trumpworth CT Valrico (City) gent's acceptance: led as registered agent and to accept so application, I hereby accept the appo	(P.O. Box NOT acceptable) , Florida 33596, Florida (Zip code) rervice of process for the above stated corporation at the interest as registered agent and agree to act in this castes relative to the proper and complete performance of	PH 4: 10 repac
(Purpose(s Name and stree Name: ffice Address: O. Registered aving been namesignated in this rther agree to c	chima A. Nwala Chima A. Nwala 4201 Trumpworth CT Valrico (City) Gent's acceptance: de as registered agent and to accept so application, I hereby accept the apponential amiliar with and accept the obligation.	(P.O. Box NOT acceptable) , Florida 33596, Florida (Zip code) rervice of process for the above stated corporation at the interest as registered agent and agree to act in this castes relative to the proper and complete performance of	13 AUG - 6 PM 4: 10 ne pac

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: Chima A. Nwala Address: 4616 25th Ave NE Ste 46 Seattle, WA 98105 Vice Chairman: Address: ____ Address: _____ **B. OFFICERS** President: Chima A. Nwala Address: 4616 25th Ave NE Ste 46 Seattle, WA 98105 Vice President; Valerie Nwala Address: 4616 25th Ave NE Ste 46 Seattle, WA 98105 Secretary: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. - Chromball 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. CHIMA A. NWALA, Chairman, President and Chief Executive Officer



I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION **OF** HANGOUT CORPORATION

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 12/2/1996.

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

Date: August 2, 2013

UBI: 601-756-115

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

Kim Wyman, Secretary of State