

F/400000289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

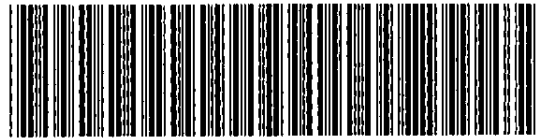
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Certified Copies _____

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S. 1/2/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Air Locker, 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:

Michael Tomczyk

Name of Person

Air Locker, Inc

Firm/Company

3700 Port Jackson Parkway, Unit 1

Address

Jacksonville, Florida 32226

City/State and Zip code

mtomczyk@arbusa.com

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

For further information concerning this matter, please call:

Michael Tomczyk

Name of Person

at (206) 313-0376

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:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input checked="" type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 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.*

1. Air Locker, Inc.

(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. Washington

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. September 5, 1991

(Date of incorporation)

5. Perpetual

(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. 720 SW 34th Street, Renton, WA 98057-4814

(Principal office address)

720 SW 34th Street, Renton, WA 98057-4814

(Current mailing address)

8. Wholesale trade

(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: Michael Tomczyk

Office Address: 3700 Port Jackson Parkway, Unit 1

Jacksonville

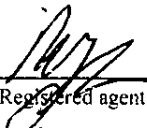
(City)

, Florida 32226

(Zip code)

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: Lachlan McCann

Address: 42-44 Garden Street, Kilsyth, Victoria, Australia 3137

Vice Chairman: _____

Address: _____

Director: Doug Pettis

Address: 720 SW 34th Street, Renton, WA 98057-4814

Director: Michael Geekie

Address: 42-44 Garden Street, Kilsyth, Victoria, Australia 3137

B. OFFICERS

President: Doug Pettis

Address: 720 SW 34th Street, Renton, WA 98057-4814

Vice President: _____

Address: _____

Secretary: Michael Geekie

Address: 42-44 Garden Street, Kilsyth, Victoria, Australia 3137

Treasurer: Michael Geekie

Address: 42-44 Garden Street, Kilsyth, Victoria, Australia 3137

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

13. 

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. Doug Pettis, President

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

UNITED STATES OF AMERICA

The State of Washington

Secretary of State



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

CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
AIR LOCKER, 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 9/5/1991.

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

Date: January 16, 2014

UBI: 601-339-519



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

Kim Wyman, Secretary of State