F14000002068

(Requestor's Name)
(Address)
(Address)
(133.555)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400260143204

05/13/14--01001--003 **87.50

DEPARTMENT OF STATE

14 MAY 12 PM 2: 41

14 MAY 12 PH 2: 58

5/12 m

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: William YOUNG 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:
Name of Person William Young Inc. Firm/Company
Name of Person
William Young INC.
Firm/Company
21485 INNSBRUCK Rictge Address
Address
Address MEDFURD OR 97504 City/State and Zip code b///owg 10316 MSN - Com E-mail address: (to be used for future annual report notification)
City/State and Zip code
6,1/100091031@ MSN-COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (541) 840-3368 Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section Division of Corporations New Filing Section Division of Corporations
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □

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

(Date of incorporation)

(Date first transacted by Characteristics and the law of transacting business in Florada)

(FEI number, if applicable)

(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) 41485 INNSBRUCK Ridge MEDFURD OR
(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) Name: 318 NE 1179 PC

CAPE CORD (, Florida 33909

(City) (Zip code) Office Address:

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: N, // IAM YOUNG
Chairman: William Young Address: 1485 Innsproof Ridge, MEUFORD, OR 97504
Vice Chairman: ν/a
Address:
Address.
Director: William Young Address: 4/485 INNSBRUK Ridge, MEDFORD, OR 97504
Address: 4/485 JUNSBRULK R. day, MEDFORD OR 97504
Director:
Address:
B. OFFICERS
President: William Young
Address: 4485 INNSBRUCK Rdys, MEDFURO, OR 07504
Vice President: N/2
Address:
Secretary: William Young
Address: 4485 Ting Brick Ridge, MEDFURD, OR 97504
- 102 // a to Vaunda
Address: 4485 Tunis Bruck Ridge, NIEDFORD, OR 97504
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
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. Mills (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing application)

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:

WILLIAM YOUNG, INC.

was

incorporated

under the Oregon

Business Corporation Act

on

January 20, 2011

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



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

KATE BROWN, Secretary of State

May 9, 2014