(shown below) on the top and bottom of all pages of the document.

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Division of Corporations

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From:

Email Address:

Account Name : NORTHWEST REGISTERED AGENT LLC

Account Number : I20090000081

Phone : (509) 768-2249

Fax Number

: (855)330-1010

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FOREIGN PROFIT/NONPROFIT CORPORATION **Substance Inc**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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.

•	ble in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)		
Oregon	3	3.		
	nder the law of which it is incorporated)	(FEI number, if applicable)		
01/16/200		Perpetual (Duration: Year corp. will cease to exist or "perpetual") in Florida, if prior to registration) 1502, F.S., to determine penalty liability) ortland, OR 97232		
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
· -		in Florida, if prior to registration) 1502, F.S., to determine penalty liability) ortland, OR 97232 ddress) cland, OR 97232		
605 NE 21	lst Avenue Suite 200, Po	ortland, OR 97232 꽃		
.,	(Principal office ad	ldress)		
605 NE 21	st Avenue Suite 200, Port	land, OR 97232		
Weheite	design services			
AACDOIG	· · · · · · · · · · · · · · · · · · ·			
(Purpose(s)	of corporation authorized in home state or	country to be carried out in state of Florida)		
(Purpose(s)	of corporation authorized in home state or taddress of Florida registered agent: (F			
(Purpose(s)	of corporation authorized in home state or	P.O. Box NOT acceptable)		
(Purpose(s) Name and stree Name:	of corporation authorized in home state or taddress of Florida registered agent: (F	P.O. Box <u>NOT</u> acceptable) INC.		
(Purpose(s) Name and stree Name:	of corporation authorized in home state or t address of Florida registered agent: (F REGISTERED AGENTS 3030 N. Rocky Point Dr, STE	P.O. Box NOT acceptable) INC. 150A		
(Purpose(s)	of corporation authorized in home state or t address of Florida registered agent: (F REGISTERED AGENTS 3030 N. Rocky Point Dr, STE	P.O. Box <u>NOT</u> acceptable) INC.		
(Purpose(s) Name and stree Name: ffice Address: Negistered againg been names alignated in this orther agree to compare to compar	t address of Florida registered agent: (F REGISTERED AGENTS 3030 N. Rocky Point Dr, STE Tampa (City) gent's acceptance: ed as registered agent and to accept see application, I hereby accept the appoin	P.O. Box NOT acceptable) INC. 150A , Florida 33607 (Zip code) rvice of process for the above stated corporation at the plantment as registered agent and agree to act in this capacity is relative to the proper and complete performance of my		

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: ____ **Todd Moritz** 605 NE 21st Avenue Suite 200, Portland, OR 97232 Director: Stephen Landau Address: 605 NE 21st Avenue Suite 200, Portland, OR 97232 B. OFFICERS President: Todd Moritz Address: 605 NE 21st Avenue Suite 200 Portland OR 97232 Vice President: Address: Secretary: Stephen Landau Address: 605 NE 21st Avenue Suite 200 Portland OR 97232 Treasurer: Todd Moritz Address: 605 NE 21st Avenue Suite 200 Portland OR 97232 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. Todd Moritz, President

(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:

SUBSTANCE INC.

was

incorporated

under the Oregon

Business Corporation Act

on

January 16, 2007

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

June 4, 2014

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