

F14 0000004632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

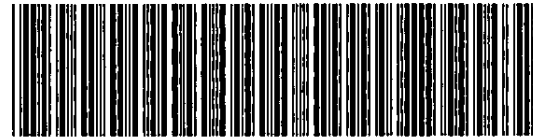
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:



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10/30/14--01031--001 \*\*78.75

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## Transmittal

**Date:** 28 October 2014  
**Project:** Florida Business Registration  
**AM Project #:** 200000  
**To:** New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301  
**From:** Katie Wilson  
**Sent via:** UPS 2-day  
**Purpose:** For your use  
**Remarks:**

### Contents

Quantity:	Dated:	Description:
1	10.28.2014	Cover Letter
1	10.28.14	Foreign Corporation Application
1	10.23.14	Certificate of Existence
1	10.23.14	Check for \$78.75

### Signature:

\_\_\_\_\_  
Ankrom Moisan Architects, Inc.  
Risk Management  
Please note: Only hard copy deliveries will be signed

ARCHITECTURE  
INTERIORS  
URBAN DESIGN  
BRANDING

#### Ankrom Moisan Architects Portland & Seattle

6720 SW Macadam Ave  
Suite 100  
Portland, OR 97219  
503.245.7100

117 S Main St  
Suite 400  
Seattle, WA 98104  
206.576.1600

ankrommoisan.com

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Ankrum Moisan & Associated Architects, 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:

Allison Hanley  
Name of Person  
Ankrum  
Firm/Company  
6720 SW Macadam Ave, Suite 100  
Address  
Portland, OR 97219  
City/State and Zip code  
allisonh@ankrummoisan.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allison Hanley at ( 503 ) 245-7100  
Name of Person 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:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$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. Ankrom moisan associated architects, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Ankrom moisan architects, Inc.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Oregon 3. 93-1014397  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/2/1989 5. Perpetual  
(Date of incorporation) (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. 6720 SW macadam Ave, Suite 100, Portland, OR 97219  
(Principal office address)

6720 SW macadam Ave, Suite 100, Portland, OR 97219  
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road  
Plantation, FL, Florida 33324  
(City) (Zip code)

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TALLAHASSEE, FL 32304

9. 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.*

Kimberly Steinmetz

**Kimberly Steinmetz, VP & Assistant Secretary  
NRAI Services, Inc.**

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS - Reference Attachment

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Tom Moisan

Address: 6720 SW Macadam Ave, Suite 100  
Portland, OR 97219

Vice President: Jason Erdahl

Address: 6720 SW Macadam Ave, Suite 100  
Portland, OR 97219

Secretary: Dave Heater

Address: 117 S. Main Street, Suite 400, Seattle, WA 98104

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

12. J. Erdahl \_\_\_\_\_

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.

13. JASON ERDAHL 10.28.14 \_\_\_\_\_

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

**I. LIST OF BOARD MEMBERS:**

1. Tom Moisan  
Address: 6720 SW Macadam Ave., Suite 100, Portland, OR 97219
2. Dave Heater  
Address: 117 South Main Street, Suite 400, Seattle, WA 98104
3. J. Murray Jenkins  
Address: 6720 SW Macadam Ave., Suite 100, Portland, OR 97219
4. Karen Bowery  
Address: 6720 SW Macadam Ave., Suite 100, Portland, OR 97219
5. Jason Erdahl  
Address: 6720 SW Macadam Ave., Suite 100, Portland, OR 97219

**II. LIST OF OFFICERS:**

1. President: Tom Moisan  
Address: 6720 SW Macadam Ave., Suite 100, Portland, OR 97219
2. Vice President: Jason Erdahl  
Address: 6720 SW Macadam Ave., Suite 100, Portland, OR 97219
3. Secretary: Dave Heater  
Address: 117 South Main Street, Suite 400, Seattle, WA 98104

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

## Certificate of Existence 206X950N4

I, Kate Brown, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

**ANKROM MOISAN ASSOCIATED ARCHITECTS, INC.**

is

Incorporated

under the laws of The State of Oregon

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

14 OCT 30 PM 4:57  
STATE  
TALLAHASSEE, FLORIDA

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



A handwritten signature in black ink, appearing to read "Kate Brown", is written over a horizontal line.

Kate Brown, Secretary of State

10/23/2014