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(Address)

(Address)

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PERFEXION CONSTRUCTION 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:

HECTOR J BARAJAS

Name of Person

Firm/Company

5300 NW 52ND. STREET

Address

COCONUT CREEK , FL 33073

City/State and Zip code

hector@perfexionconstruction.com

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

For further information concerning this matter, please call:

HECTOR J BARAJAS at (503) 522-3677

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. **PERFEXION CONSTRUCTION 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. **OREGON** 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. **12-13-2005** 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. **5300 NW 52ND. STREET COCONUT CREEK, FL 33073**
(Principal office address)
- 5300 NW 52ND. STREET COCONUT CREEK, FL 33073**
(Current mailing address)

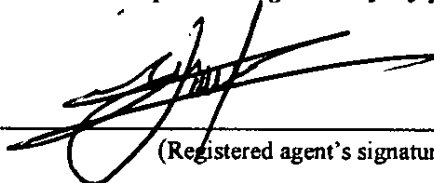
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **HECTOR J BARAJAS**

Office Address: **5300 NW 52ND. STREET**
COCONUT CREEK, Florida **33073**
(City) (Zip code)

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.


(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

Chairman: JOEL BARAJAS BERMUDEZ

Address: 2010 SW 217TH AVE. ALOHA, OREGON 97006

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JOEL BARAJAS BERMUDEZ

Address: 2010 SW 217TH AVE. ALOHA, OREGON 97006

Vice President: _____

Address: _____

Secretary: HECTOR J BARAJAS

Address: 5300 NW 52ND. STREET COCONUT CREEK, FL 33073

Treasurer: _____

Address: _____

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

12. _____

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. HECTOR J BARAJAS

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

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 267F827K3

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

PERFEXION CONSTRUCTION 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.

*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 the line for the Secretary of State.

Kate Brown, Secretary of State

1/6/2015

15 JAN 16 PM 1:02
OFFICE OF THE SECRETARY OF STATE
CORPORATION DIVISION
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11/11/15 BY 60322 UCBAW