# F15000000148

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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T. SCOTT



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 508432 7663927

AUTHORIZATION : Francis & Const.

COST LIMIT : \$/70.00

ORDER DATE: February 19, 2015

ORDER TIME : 12:06 PM

ORDER NO. : 508432-005

CUSTOMER NO: 7663927

#### FOREIGN FILINGS

NAME: WESTERN INSTITUTIONAL REVIEW

BOARD, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

	Filing Section ion of Corpor				
SUBJECT:	Western Ins	títutional Review E	Board, Inc.		
SCEOLE I.		Name of c	orporation	- must include suffix	
Dear Sir or M	ladam:				
"Certificate o	f Existence,"	or "Certificate of	Good Stan	ding" and check are sub	
Please return	all correspond	dence concerning	this matter	to the following:	
Megan Seabo	om				
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:  Megan Seaborn  Name of Person  Western Institutional Review Board, Inc.  Firm/Company  1019 39th Avenue SE, Suite 120  Address  Puyallup, WA 98374  City/State and Zip code  mseaborn@wcgclinical.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Megan Seaborn  at (360 ) 252-2829  Name of Person  Area Code & Daytime Telephone Number					
Western Insti	tutional Revie	w Board, Inc.			
		-	Firm/Com	pany	
1019 39th Av	enue SE, Sui	te 120			
			Addre	ess	
Puyallup, WA	98374				
		C	ity/State ar	nd Zip code	
mseaborn@v	vegelinical.com	n			
		E-mail address: (to	be used f	or future annual report n	otification)
For further in	formation cor	cerning this matte	r, please c	all:	
Megan Seabo	orn	at (	360	252-2829	
Name	e of Person		Area (	Code & Daytime Telepho	one Number
New l Divisi Clifto 2661 Tallah	Filing Section ion of Corpor in Building Executive Ce nassee, FL 32	ations	:	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl	ction rporations
<b>\$70.00</b> File	ing Fee □	\$78.75 Filing Fe Certificate of St		\$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.

"Inc.," "Co.," "Corp,"  N/A  (If name unavailable i  Washington State	ration; must include "INCORPORATED,"  "Inc," "Co," or "Corp.")  in Florida, enter alternate corporate name a	adopted for the purpose of transacting business in Florida) 91-1002554	<del></del>	
(If name unavailable in Washington State	in Florida, enter alternate corporate name :		<del></del>	
Washington State	in Florida, enter alternate corporate name		)	
	3.	91-1002554		
(State or country und		91-1002554		
	der the law of which it is incorporated)	(FEI number, if applicable)		
08/24/1977	5.	Perpetual		
(Date of in	ncorporation)	(Duration: Year corp. will cease to exist or "perpetual")	)	
February 18, 2015				
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
1019 39th Avenue S	SE, Suite 120, Puyallup, Washington 9	8374		
	(Principal office add	ress) Z	2	
1019 39th Avenue 9	SE, Suite 120, Puyallup, Washington 9	98374	<u></u>	
	(Current mailing add		 い 	
	dress of Florida registered agent: (P.C			
Name: C	orporation Service Company			
fice Address:	201 Hays Street	Q	<u>بر</u>	
<del></del>	allahassee	32301 , Florida		
	(City)	(Zip code)		

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: \_\_\_\_See attached. Address: Vice Chairman: See attached. Address: \_\_ See attached. Director: Address: Director: See attached. Address: \_ **B. OFFICERS** President: See attached. Address: Vice President: \_\_\_ See attached. See attached. Secretary: Address: Address: 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.

13. \_\_\_ Tom Marren, Vice President and Treasurer

#### Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida

#### Officers and Directors

#### **Directors**

Don Deieso, Chief Executive Officer and Executive Chairman Address: 202 Carnegie Court, Suite 107, Princeton, NJ 08540

Stephen McLean, Director

Address: 202 Carnegie Court, Suite 107, Princeton, NJ 08540

#### **Officers**

Don Deieso, Chief Executive Officer and Executive Chairman Address: 202 Carnegie Court, Suite 107, Princeton, NJ 08540

Tom Marren, Vice President and Treasurer

Address: 202 Carnegie Court, Suite 107, Princeton, NJ 08540

Alan Lefkowitz, Vice President and Secretary

Address: 202 Carnegie Court, Suite 107, Princeton, NJ 08540

Andrew Messick, Assistant Treasurer

Address: 202 Carnegie Court, Suite 107, Princeton, NJ 08540

Laurie Jackson, Chief Operating Officer Address: 1019 39th Ave. SE, Suite 120, Puyallup, WA 98374

MARKE .

- 25331618

# UNITED STATES OF AMERICA The State of Batate of State **Bashington**

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

### CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

WESTERN INSTITUTIONAL REVIEW BOARD, 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 8/24/1977.

I FURTHER CERTIFY that as of the date of this certificate, WESTERN INSTITUTIONAL REVIEW BOARD, INC. remains active and has complied with the filing requirements of this office.

Date: February 20, 2015

UBI: 600-247-189

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

Kim Wyman, Secretary of State