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To:

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Fax Number : (850)617-6383

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Fax Number

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FOREIGN PROFIT/NONPROFIT CORPORATION

Mithun, Inc.

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1/14/2016

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TO: R	egistration S	Contion						
-		orporations						
SUBJEC	T: Mithun	, ľnc.						
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Dear Sir o	r Madam:				•			
"Certifica:	e of Exister		ate of Good S	Stan	Authorization to Transa ding" and check are suits in Florida.)
Please retu	ırın ail corre	spondence conce	ming this me	itter	to the following:			
Nace White	2							
			Name	of F	'erson		······································	
Mithun, Inc).							
			Firm/C	om	pany			
1201 Alesk	an Way, Sui	te 200					产品	200
			Ad	dre	SS) » : : :	(
Seattle, W/	98101				·		62	Œ
			City/Stat	ie an	d Zip code		#15 (4) #15 (4) #15	Ξ
Naoew@m	ithun.com	C mail adds	age (to be us	जर	or future annual report	matification)		<u>~</u>
For further	Information	n concerning this	·		·	notification)	CIAC	::: O
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Rej Div Cli 260 Tal	gistration Sovision of Co Ron Buildir I Executive Inhassee, Fi	orporations ng e Center Circle L 32301			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7		
Enclosed is	a check for	the following ar	nount:					
3 \$70.00 i	Filing Fee	S78.75 Fili Certificate			\$78.75 Filling Fee & Certified Copy	\$87.50 I Certific Certific	ate of Sta	

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.

i. Mithun, Inc.	1 1 1 10000000 1770	D GOOD AD ANIA M GOOD DOD A TOO M I	
	corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
(If name unavai	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting busine	ss in Florida)
2. Washington	3.	91-1093821	
**	try under the law of which it is incorporated)	(FEI number, if applicable)	1
4. 01/02/1980	5.	(Date of duration, if other than per	
(Dat	e of incorporation)	(Date of duration, if other than per	petual)
6		Section 1 de la lateratura de lateratura de la lateratura de lateratura de la lateratura de la lateratura de la lateratura de	100 12
		r Florida, if prior to registration) 502, P.S., to determine penalty liability)	
7 1201 Aleskan W	ay, Stc. 200, Picr 56, Seattle, WA 98101-2913		
′ '	(Princi	pal office address)	(3.5) (3.5)
		ng address, if different)	F17.
	(Current maili	ng address, if different)	- 共物 >
0. Managan dan	or adding a Collection and amounts of the	D. D NOT apparentable)	
8. Name and stre	et address of Florida registered agent: (P.0	J. Box 1901 acceptable)	<u> </u>
Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road		
	Plantation, FL 33324	Florida	
	(City)	(Zip code)	
0 Registered no	ent's acceptance:		
Having been nan	ned as registered agent and to accept servi	ce of process for the above stated corpo	ration at the place
designated in this further agree to c	e application, I hereby accept the appoints comply with the provisions of all statutes t	nent as registered agent and agree to ac- elative to the proper and complete perfo	rmance of my
duties, and I am	familiar with and accept the obligations o	f my position as registered agent.	~ -
	C T Corporation 8	Jane Za	chritz
Rv:	Jana Backuts		
53.	(Registered)	ngent's signature) Asst. Sec	recary

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.

A. DIRE	CTORS			
Chairman:	Picase see attached.			
Address: _				<u></u>
			 	
Vice Chair	nan:			
Address: _			·····	<u></u>
_				
Director:	•			
_				
Director:				
_				
B. OFFIC	CERS		-	
	Please see attached.	X _S	20	
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		J.S.	5	
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				,
Address:				
	necessary, you may attach an addendum to the application listing additional officers an	d/or director	5.	
12	Signature of Director or Officer			
are true and	or director signing this document (and who is listed in number 11 above) affirms that to that he or she is aware that false information submitted in a document to the Department of the Departm			
_	Soldberg, President			
	(Typed or printed name and capacity of person signing application)			

1/14/2016 9:24:41 AM From: To: 8506176383(5/6)

Mithun Inc. Board of Directors and Officers (公公司) as of 11/116

Name	Titte	State	Cense#	Profession	Exp	Address	3	4000	ķ
Bert E. Gradony III	Chairman	WA	4411	Ambigun	8/20/2017	1201 Aberton Marie Course Poor	1		3
				A CHIEFE	COCCUE	LEVI MASSERED YERY, CURE ZUE	- Seatte	₹	5
Cavit vy. Goldberg	Fresident and I reasurer	WA	=======================================	Architect	SY12/2016	1201 Alaskan Way Srifts 200	1169	3	ğ
Bryce L. Williams	Secretary	9/93	2690	Ambiana	04000000	200			
F		44	3000	ARTHEC	#152018	1201 Alaskan Way, Suite 200	- Seattle	×	38 ₹
Sill Caraca	Director	₹X	4915	Architect	8/11/2016	1201 Alaskan Way Sima 200	Copple	14/4	200
Richard Concode	Viro Drocidoni	777	2000				Coding		
The state of the s	TING I TOMOGRAM	WA	2002	Archied	372772036	1201 Alaskan Way, Suite 200	Seattle	ş	981
Arme Tomey	Vice President	ర	C24386	Architect	30317017	T	Con Empirer	į	
Sens Stainer	Discoules						2011 1 00 00 00	ş	Š
Vascili Stelliel	חופמת	Y M				1201 Alaskan Way, Suite 200	Seattle	AW	244
							2		3

AND ANASONE TO COMPA

2016 JAN 14 A 11:00

CHIEF.



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

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF MITHUN, 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 1/2/1980.

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

Date: January 13, 2016

UBI: 600-362-160



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

Kim Wyman, Secretary of State