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Office Use Only



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JUN 28 2016

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Nytec, 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:
Dana Dorsett Name of Person
Nytec, Irc. Firm/Company
416 6th Street South
Kirkland, WA 98033 Fig. 71 City/State and Zip code
RICHL@NYTEC.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dana Dorsett at (206) 229.5657  Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & Certificate of Status \$\Bigcup \\$78.75 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. Nytec, 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. Washington State 3. 91-1433111	_
(State or country under the law of which it is incorporated) (FEI number, if applicable)	-
4. <u>01   17   1989</u> 5	_
4. Olde of incorporation)  5. (Date of incorporation)  (Date of duration, if other than perpetual)	
6. upon registration	_
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7.416 6th Street South, Kirkland, WA 98033 (Principal office address)	-
,	
(Current mailing address, if different)	-
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: NRAI SERVICES, ITC.	m
Office Address: 1200 South Pine Island Road 55 5	0
Plantation, Florida 33324	
(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	
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capa further agree to comply with the provisions of all statutes relative to the proper and complete performance of n	
jurther agree to comply with the provisions of all statutes relative to the proper and complete performance of n duties, and I am familiar with and accept the obligations of my position as registered agent.	ıy
Please see attached form from C	Т
(Registered agent's signature)	<b>~ \</b>
(B	

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.



June 20, 2016

Florida Secretary of State

RE: Consent to Serve as Registered Agent for Nytec, Inc.

To Whom It May Concern:

NRAI Services, Inc., located at 1200 South Pine Island Road, Plantation, FL 33324, hereby accepts its appointment as Registered Agent for the above-referenced entity in the state of Florida. It is our responsibility to receive Service of Process on behalf of the entity; forward such process to the entity; and to immediately notify the office of the Secretary of State if we resign or change the Registered Office address.

Very truly yours,

Stephania Boehm

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_ Address: \_ Vice Chairman: Address: Director: \_ Address: Address: **B. OFFICERS** President: RICHARCI J. LETZ, JR Address: 416 6th Street South Kirkland, WA 98033 Vice President: Address: ICIANCI, WA 98033 ary, you may attach an addendum to the application listing additional officers and/or directors. NOTE: If neces 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. (Typed or printed name and capacity of person signing application)



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

## CERTIFICATE OF EXISTENCE

OF

NYTEC, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 1/17/1989.

I FURTHER CERTIFY that the entity's duration is Perpetual,

and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest and penalties owed to this state and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Date: June 10, 2016

UBI: 601-154-688

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

Kim Wyman, Secretary of State



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