Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000115323 3)))



H180001153233ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one: email address please.

Email	Address:
-------	----------

MECEIVED 2018 APR 12 AM 9: 35 DEPARTMENT OF STATE INISION OF CORPORATION TALLA HASSEE, FLORE

FOREIGN PROFIT/NONPROFIT CORPORATION

Bittitan, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

K SALY APR 13 2018

-21.00

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.	Bittitan,Inc.						
	(Enter name of c	orporation: must include "INCORPORATI orp," "Inc," "Co," or "Corp,")	ED,	"COMPANY," "CORPORATION,"			
	(If name unavails	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)			
2.	Washington		3.	90-0352223			
4	02/06/2008	y under the law of which it is incorporated)		(FEI number, if applicable) Perpetual			
••	(Date	of incorporation)	.,,	(Date of duration, if other than perpetual)			
6.	1120112THAV	i Florida, if prior to registration) 502, F.S., to determine penalty liability)					
/٠.	(Principal office address) 218MAINST,#719,KIRKLAND,WA,98033						
(Current mailing address, if different)							
8.	Name and <u>street address</u> of Florida registered agent: (P.C. Name:			D. Box NOT acceptable)	FIL		
Ol	ffice Address:	1200SouthPineIslandRoad		——————————————————————————————————————	ED		
		Plantation	-	, Flórida 33324			
		(City)		(Zip code) 景元 5			

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.

CTCorporationSystem

Kimberly Baggett-Asst Secretary

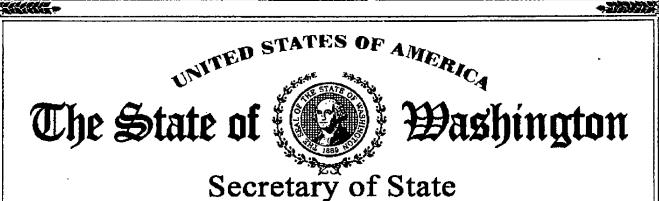
(Registered agent's signature)

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.

COM

		FILED
11. Names and business addresses of officers and/or directors:		18 APR 12 "
A. DIRECTORS) () () (SECRETARY OF STATE
Chairman;		THE PLOENS
Address:		11/38
	· :.	
Vice Chairman:	iliger A	
Address:		
		
Director:	· · · · · · · · · · · · · · · · · · ·	
Address:		
Director:	<u> </u>	
Address:		
B. OFFICERS). -	
President: Geeman Yip	•	
Address: 1120 112TH AVE NE, STE 300,		
BELLEVUE, WA, 98004		
Vice President:	97 309	
Address:		
Secretary:		
Address:		
Treasurer:	······································	
Address:		The sign of the si
NOTE: Incurssary, you may attach an addendum to the applicant	tion listing addit	ional officers and/or directors.
Signature of Director of The officer or director signing this document (and who is listed in are true and that he or she is aware that false information submitte a third degree felony as provided for in s.817.155, F.S.	number 11 abov	ve) affirms that the facts stated herein to the Department of State constitutes
13. Geeman Yip , CED		
(Typed or printed name and capacity of p	erson signing ap	prication)

- 722



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

CERTIFICATE OF EXISTENCE

ΩF

BITTITAN, INC.

I 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 02/06/2008.

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 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.

Al Issued Date: 04/10/2018

UBI Number: 602 801 277



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

Kim Wyman, Secretary of State

Date Issued: 04/10/2018