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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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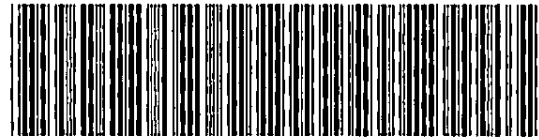
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

O SIMMONS
FEB 04 2019

COVER LETTER

TO: Registration Section
Division of Corporations
MIS Consulting & Sales, Inc.

SUBJECT: _____
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:
Kendra Kalimanis

Name of Person
MIS Consulting & Sales, Inc.

Firm/Company
1260 NW Waterhouse Ave, Suite 190

Address
Beaverton OR, 97006

City/State and Zip code
Accounting@mis-c.com

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

For further information concerning this matter, please call:

Kendra Kalimanis 503 614-1919

Name of Person at () Daytime Telephone Number
Area Code

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 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 ☐ \$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.*

MIS Consulting & Sales, Inc.

1. _____
(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)
Oregon 93-1004064

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
1989-05-18

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
1260 NW Waterhouse Ave, Ste 190, Beaverton, OR 97006

7. _____
(Principal office address)

_____ (Current mailing address, if different)

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

Name: Anna Stegawska

Office Address: 7226 Presidio Glen

Lakewood Ranch, Florida 34202
(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.

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TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Kendra Kalimanis

Chairman:

1260 NW Waterhouse Ave, Suite 190, Beaverton, OR 97006

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

Kendra Kalimanis

President:

1260 NW Waterhouse Ave, Suite 190, Beaverton, OR 97006

Address:

Jerry Kalimanis

Vice President:

1260 NW Waterhouse Ave, Suite 190, Beaverton, OR 97006

Address:

Suzanne Allen

Secretary:

1260 NW Waterhouse Ave, Suite 190, Beaverton, OR 97006

Address:

Suzanne Allen

Treasurer:

1260 NW Waterhouse Ave, Suite 190, Beaverton, OR 97006

Address:

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

12. Kendra Kalimanis

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.

Kendra Kalimanis, President

13. _____

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 537L276A2

I, DENNIS RICHARDSON, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

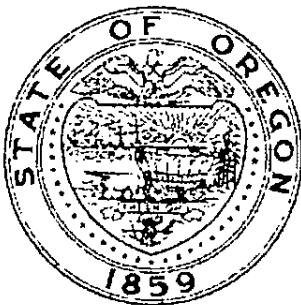
MIS CONSULTING AND SALES, INC.

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 cursive script, reading "Dennis Richardson".

DENNIS RICHARDSON, SECRETARY OF STATE

10/25/2018