P900001114

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(6.1). 2.2.2.2
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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1





Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.Incserv.com

e-mail: accounting@incserv.com

incserv^o

ORDER FORM

Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301

corphelp@dos.myflorida.com

File the attached foreign qualification document

850-245-6051

FROM Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST_DATE 3/7/2019	PRIORITY_ Routine	OUR REF_#_(Order 10#) 726606
ORDER ENTITY		
RATIONAL INTERACTION, INC.		Serve - M
		THE TO
PLEASE PERFORM THE FOLLO	OWING SERVICES:	(G.)
RATIONAL INTERACTION, IN	√C. (FL)	差折の

\$70.00 Authorized Email address for annual report reminder: johnson@ryanlaw.com	1	
RETURN/FORWARDING INSTRUCTIONS:		

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, March 07, 2019

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.

Rational Inter	corporation; must include "INCORPORATED,"	" "COMPANY," "CORPORATION,"
"inc.," "Co.," "	Corp," "Inc," "Co," or "Corp.")	
(If name unava	ilable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
Washington 2.		
(State or coun	try under the law of which it is incorporated)	(FEI number, if applicable)
July 29, 2009 4.		Perpeptual
(Date of incorporation) (Date of duration, if other than perpetual)		(Date of duration, if other than perpetual)
Upon filing 6.		
-	(Date first transacted business in	Florida, if prior to registration) 502, F.S., to determine penalty liability)
	enue, Suite 5200, Seattle, WA 98101	
	(Princip	oal office address) ω^{\pm} .
1201 Third Ave	enue, Suite 5200, Seattle, WA 98101	
	(Current mailir	ng address, if different)
8 Name and str	eet address of Florida registered agent: (P.C	Pow NOT acceptable
O. Islanic and gift		5. Box NOT acceptable)
Name:	C T Corporation System	
Office Address:	i 200 South Pine Island Road	
	Plantation	33324 . Florida
	(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.

Brian Mueller
Assistant 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.

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

A. DIRECTORS Chairman: Vice Chairman: _____ Joseph Debons Director: 1201 Third Avenue, Suite \$200 Address: Seattle, WA 98101 Selina Petosa Director: 1201 Third Avenue, Suite 5200 Address: Seattle, WA 98101 **B. OFFICERS** Joseph Debons President: 1201 Third Avenue, Suite 5200 Address: Seattle, WA 98101 Selina Petosa Secretary: 1201 Third Avenue, Suite 5200, Scattle, WA 98101 Address: Joseph Debons Treasurer: 1201 Third Avenue, Suite 5200, Seattle, WA 98101 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 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 \$.817.155, F.S. residend 05006 (Typed or printed name and capacity of person signing application)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Rational Interaction, Inc.

Herein listed below is the name and address of additional officers and/or directors.

Selina Petosa Co-President 1201 3rd Avenue, Suite 5200 Seattle, WA 98101



The State of Washington

Secretary of State

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

CERTIFICATE OF EXISTENCE

OF

RATIONAL INTERACTION, INC.

1 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 07/29/2009.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the seconds 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.

Issued Date: 01/28/2019

UBI Number: 602 942 224

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

Kim Wyman, Secretary of State

Date Issued: 01/28/2019