

★ F19000002068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

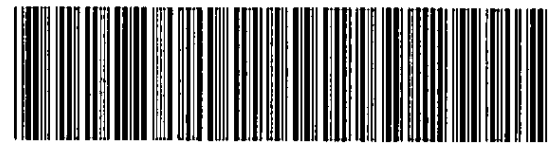
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W190000631902

Office Use Only



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03/18/19--01051--016 **76.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y SCOTT

MAY 1 2019

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2019

JORDAN THEURER
1455 NW IRVING ST.
SUITE:800
PORTLAND, OR 97209

SUBJECT: WACOM TECHNOLOGY CORPORATION
Ref. Number: W19000031902

We have received your document for WACOM TECHNOLOGY CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Yvette Scott
Document Specialist II

Letter Number: 319A00006252

Jordan Theurer
1455 NW IRVING STREET
STE 800
PORTLAND, OR 97209
Date

DIVISION OF CORPORATIONS
REGISTRATION SECTION
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

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TALLAHASSEE, FLORIDA

Dear DIVISION OF CORPORATIONS:

We have received your notification regarding 'Wacom Technology Corporation' name not being available for use in Florida. Due to this conflict we have withdrawn transaction of the entity that was in conflict our use of this name. Withdrawn entity was as follows 'Wacom Technology Services, Corp' Document number F10000004221, Federal ID number 30-0635114. This entity is no longer in use.

We request that our annual filing for 'Wacom Technology Corporation' be accepted per name conflict being resolved due to entity withdrawal. Our filing information is as follows; 'Wacom Technology Corporation' Document number W19000031902, Federal ID number 77-0285014.

Supporting documentation has been attached for your reference and if any questions arise please contact us at 503-525-3257

Sincerely,



Jordan Theurer

Accounting Manager

Wacom Technology Corporation



Elswick, Felix

From: Theurer, Jordan
Sent: Wednesday, April 17, 2019 5:41 AM
To: Elswick, Felix
Subject: FW: Corporate Withdrawal - F10000004221

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TALLAHASSEE, FLORIDA

-----Original Message-----

From: OnlineWebEvent@dos.state.fl.us <OnlineWebEvent@dos.state.fl.us>
Sent: Wednesday, April 17, 2019 12:37 AM
To: Theurer, Jordan <Jordan.Theurer@wacom.com>
Subject: Corporate Withdrawal - F10000004221

[EXTERNAL]

Re: Document Number F10000004221

Having fulfilled the requirements of section 607.1520 or 617.1520, F.S., on April 16, 2019, this Certificate of Withdrawal is hereby issued to WACOM TECHNOLOGY SERVICES, CORP., a Washington, corporation, in accordance with said statute. The corporation may now withdraw from the state of Florida.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Division of Corporations

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wacom Technology Corporation

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:

Jordan Theurer

Name of Person

Wacom Technology Corporation

Firm/Company

1455 NW Irving St. Suite 800

Address

Portland, OR 97209

City/State and Zip code

jordan.theurer@wacom.com

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

For further information concerning this matter, please call:

Jordan Theurer

503

525-3257

at ()

Name of Person

Area Code

Daytime Telephone Number

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.

Wacom Technology Corporation

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)

2. Washington 3. 77-0285014
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 23, 2001 5. Perpetual
(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)

7. 1455 NW Irving St Suite 800, Portland, OR 97209
(Principal office address)

(Current mailing address, if different)

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

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 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.

Pe. Nina

Peter Trawinski
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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Jeremy Marker

Address: 523 W Y St.

Washougal, WA 98671

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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.

13. Jeremy Marker, President

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

UNITED STATES OF AMERICA

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

WACOM TECHNOLOGY CORPORATION

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SECOND JAIL OF STATE
TALLAHASSEE, FLORIDA

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 03/23/2001.

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.

Issued Date: 02/26/2019
UBI Number: 602 108 626



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

Kim Wyman

Kim Wyman, Secretary of State

Date Issued: 02/26/2019