# F1900003773

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Names)
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W1900058754
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 21, 2019

JAIME HARTMANN 123 NE THIRD AVE, STE 400 PORTLAND, OR 97232 US

SUBJECT: CASCADE ENERGY INC

Ref. Number: W19000058754

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

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$650.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Zakiya M Brown Regulatory Specialist II

Letter Number: 119A00012599

RECEIVED

**AUG** 1 3 2013

### **COVER LETTER**

TO:	_	tration Second on of Cor					
SUBJI			inergy Inc				
SUBJI	r.CT;			ne of corpora	tion - r	must include suffix	
Dear Si	ir or M	adam:					
"Certif	icate of	Existenc	ion by Foreign e," or "Certific n corporation (	cate of Good	Standii	ng" and check are sub	nct Business in Florida," omitted to register the
Please : Jaime I		_	ondence conce	erning this m	atter to	the following:	
				Name	of Per	rson	
Cascade	e Energ	<u>y</u>					
123 NE	Third 2	Vve. Ste 40	0	Firm/C	Compa	ny	
Portland	d. OR 9	7232		A	ddress		
jaime.h	artmann	@cascade	energy.com	City/Sta	te and	Zip code	
			E-mail addr	ress: (to be us	ed for	future annual report	notification)
For furt	ther inf	ormation	concerning thi	s matter, plea	se call	:	
Jaime Hartmann			971 at (	,	361-2268		
Name of Person		ai ( 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		
Enclose	ed is a c	theck for	the following a	amount:			
<b>=</b> \$70.	.00 Fili	ng Fee	☐ \$78.75 Fi Certifica	ling Fee & te of Status		78.75 Filing Fee & Tertified Copy	S87.50 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.

me., co., ct	orp." "Inc," "Co." or "Corp.")					
N/A						
(If name unavaila	ble in Florida, enter alternate corporate nan	ne a	dopted for the purpose of transacting b	ousiness in Florida)		
Oregon			93-1124681			
(State or country under the law of which it is incorporate			3(FEI number, if applicable)			
8-30-1993			Perpetual			
(Date of incorporation)			(Date of duration, if other than perpetual)			
1/15/2018	(Date first transacted busines					
	e., Ste 400, Portland, OR, 97232		02. F.S., to determine penalty liability			
	(Current ma	uilin	g address, if different)	···		
. Name and <u>stree</u> Name: Office Address:	ct address of Florida registered agent: ( CT Corporation 1200 S. Pine Island Rd.	P.C	D. Box <u>NOT</u> acceptable)			
	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.

Bree Zahneer
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: Address: \_\_\_ Director: **B. OFFICERS** Marcus Wilcox President: 19 E. Cherry St., Address: \_ Walla Walla, WA 99362 ī, Mike McDevitt Vice President: 19 E. Cherry St. Address: \_ Walla Walla, WA 99362 Rob Morton Secretary: 123 NE Third Ave., Ste 400, Portland, OR 97232 Address: \_ Glen Thomas Treasurer: 2162 W Grove Pkwy, Ste 210. Pleasant Grove, UT 84062 Address: 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 s.817.155. F.S. Marcus Wilcox, Chief Executive Officer 13.

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



# State of Oregon

# OFFICE OF THE SECRETARY OF STATE Corporation Division

### Certificate of Existence 385U836Y7

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

### CASCADE ENERGY, 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.

BEV CLARNO, SECRETARY OF STATE
7/16/2019