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.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this

page. Doing so will generate another cover sheet.

TC:

Division of Corporations

Fax Number : (850) 617 6383

From:

Account Name : INCORP SERVICES INC

Account Number : (20120000007 Phone : (702)866-2500

FDX Number : (702)866-2689

5 PH 4: 52

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

Email Address: documents@incorp.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Smart Energy Today, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	0.5
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help



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Page: 3/6

Date: 10/15/2019 8:30:43 AM

COVER LETTER

Division of Co	porations							
SUBJECT:	SUBJECT: Smart Energy Today, Inc							
	Name of corporation - must include suffix							
Dear Sir or Madam:								
"Certificate of Existence		for Authorization to Transs Standing" and check are sul siness in Florida.	omlitted to register the					
Please return all corres	condence concerning this m	atter to the following:	CC Alli					
	Courtne	ey Thomas	AHÁSSE					
	Name	of Person	rn ~					
	InCorp 5	Services, Inc.	FL					
	Firm/	Company	201					
	3773 Howard Hug	hes Pkwy. Suite 500s	52 DA					
	A	ddress	·					
	Las Vegas,	NV 89169-60 1 4						
	City/St	ite and Zip code	- *****					
	document	s@incorp.com						
	E-mail address: (to be u	sed for future annual report	notification)					
For further information	concerning this matter, plea	ase call:						
ey Thomas on behalf of InCo	rp Services, Inc. or	800-246-2	2677					
Name of Perso			-					
Registration Se Division of Cor Clifton Buildin 2661 Executive	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		DDRESS: Section orporations 7 **L 32314***					
Enclosed is a check for	the following amount:							
₩ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified 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 COPPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

lf name unavail	able in Florido, enter alternate corporate name	s adopted for the purpose of gransacting bu	isiness in F	florida)
Washington	3		1	~ ;
(State or count	y under the law of which it is incorporated)	(FEI number, if applies	ahļā) ¦	
03/26/2008	S	Perpetual .	[A.	<u> </u>
(Date	of incurporation)	(Dute of duration, if other than		
Upon Filing			155	5
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	m <u>e</u> E.	P):
2500 Moltima	n Rd SW Suite 100, Turnwater, WA 9	8512	07.5. 1.0.5.	<u></u>
1001 Cooper	(Princ Point RD SW, Suite 140-290, Olympia, W	ipal office address) /A 98502	DA.	52
	(Current moil	ing address, if different)		•
	(Current mail at address of Plorida registered agent: (P InCorp Services, Inc.			-
Name and stree	at address of Plorida registered agent: (P			
Name and stree	it address of Plorida registered agent: (P InCorp Services, Inc. 17888 67th Court North	O. Box NOT acceptable)		
Name and street	it address of Plorida registered agent: (P InCorp Services, Inc. 17888 67th Court North			
Name and stree Name: Thee Address: Registered againg been name signated in this other there agree to contact the street of th	it address of Plorida registered agent: (P InCorp Services, Inc. 17888 67th Court North Loxahatchee	O. Box NOT acceptable) Florida 33470 (Zip code) Plee of process for the above stated complete a stated complete and agree to the proper and complete a relative to the proper and complete a	o act in t	his mae

10. Attached is a certificate of existence duly authoritizated, 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.

From: GFI FaxMaker To: 8506176380 Page: 5/6 Date: 10/15/2019 8:30:43 AM

ł 1.	Names an	d bus	iness	addresses	of	officers	and/or	directors:
------	----------	-------	-------	-----------	----	----------	--------	------------

A. DIREC	TORS	
Chairman: _		
Address:		
Vice Chairm	an:	
Address:		
	Rex Schade	
Director:	2500 Mottman Rd SW Sulte 100	
Address:	Tumwater, WA 98512	21119
_		91
Director:		ASSE S
Address:		EE F1
B. OFFIC	ERS Rex Schade /	i: 52 JRIDA
President: _	2500 Mottman Rd SW Suite 100	
Address:		
	Turnwater, WA 98512	
	nt:	
Address:		
 Secretary: _	Yumi Schade	
Address:	2500 Mottman Rd SW Suite 100. Turnwater, WA 985	12
Treasurer:	Yuml Schade	
Address:	2500 Mottman Rd SW Suite 100, Turnwater, WA 985	12
NOTE: If:	necessary, you may attach an addendum to the application listing	ng additional officers and/or directors.
	Signature of Director or Officer or director signing this document (and who is listed in number that he or she is aware that false information submitted in a doce felony as provided for in s.817.155, F.S.	11 obores office that the former to
	mi Schode Secretary	
	(Typed or printed name and capacity of person sign	ning application)



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

CERTIFICATE OF EXISTENCE

OF.

SMART ENERGY TODAY, INC

ALLAHASSEE, 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 0.3/26/2008.

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.

Issued Date: 10/15/2019
UBI Number: 602 817 145

STATION

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

Kim Wyman, Secretary of State

Date Issued: 10/15/2019