F2100005583

(Requ	uestor's Name)
nbbA)	ess)
(Addr	ress)
(City/	State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busi	ness Entity Name)
(Docu	ument Number)
Certified Copies	Certificates of Status
Special Instructions to Fi	ling Officer:

Office Use Only



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2021 SEP 24 AH 11: 58

SEP 3 0 2021 M. SOLOMON

COVER LETTER

	gistration Section vision of Corporations					
SUBJEC	T: Retail Construction Associate	s. Inc.				
000000		of corporation -	must include suffix	· · · · · · · · · · · · · · · · · · ·		
Dear Sir o	Madam;					
"Certificat	ed "Application by Foreign Co e of Existence," or "Certificate renced foreign corporation to tr	of Good Stand	ing" and check are submitt			
Please retu	rn all correspondence concerni	ng this matter t	o the following:			
Justin Cam	pbell					
		Name of P	erson			
Retail Cons	struction Associates, Inc.					
		Firm/Comp	pany			
12514 130t	h Ln NE					
		Addres	is s			
Kirkland, V	√A 98034					
		City/State and	d Zip code			
info@rca-ii						
	E-mail address	: (to be used fo	r future annual report notif	ication)		
For further	information concerning this m	atter, please ca	II:			
Hannah Yo	Hannah Young at (425)		605-5661	05-5661		
N	ame of Person		Daytime Telephone	e Number		
Re Di Th 24	REET/COURIER ADDRESS registration Section vision of Corporations re Centre of Tallahassee 15 N. Monroe Street, Suite 810 llahassee, FL 32303		MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on orations		
	s a check for the following amore check payable to: FLORIDA DE Filing Fee S78.75 Filing Certificate of	EPARTMENT (g Fee &		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.

1. Retail Const	truction Associates, Inc.			
	of corporation; must include "INCORPORATED," "Corp." "Inc," "Co." or "Corp.")	" "COMPANY," "CORPORATION,"		
RCA. Inc.				
(If name una	vailable in Florida, enter alternate corporate name	adopted for the purpose of transacting bus	iness in Florida)	
Washington 3.		81-2140097		
(State or co	ountry under the law of which it is incorporated)	81-2140097 (FEI number, if applicable)		
4. 3/30/16	5.			
(1	Date of incorporation) 5.	(Date of duration, if other than p	erpetual)	
6.				
	(Date first transacted business in	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
12514-13045	Ln NE, Kirkland WA 98034	502, F.S., to determine penalty habitity)		
7		ce street address)		
	(Frincipal offi	ce street address)		
	(Current mailin	g address, if different)	20	
8. Name and <u>s</u> Name	street address of Florida registered agent: (P.C. Hannah Young	D. Box <u>NOT</u> acceptable)	2021 SEP 24	
Office Addres	420 Crystal Beach Ave #123		24 AM 11:1	
	Crystal Beach	, Florida 34681	± ₩	
	(City)	(Zip code)		

9. Registered agent's acceptance:

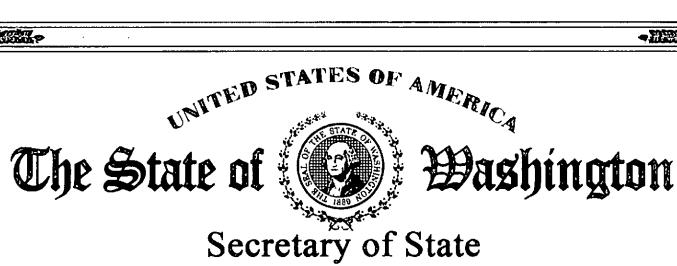
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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 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.

A. DIRECTORS						
Chairman	Justin Campbell Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
Director	Kirkland, WA 98034	□Director				
□President		□President				
□Vice President		☐ Vice President				·····
Secretary	□Treasurer	Secretary		□Treasurer		
□ Other	Other	Other		Other		
□ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director		 -		
President		□President				202
□Vice President		□Vice President				- <u> </u>
□Secretary	Treasurer	□Secretary		□Treasurer		130
□Other	Other	□ Other	·····	Other	<u> 16</u>	<u> </u>
					254	
	Name:	Chairman	Name:		··· · ·	<u> </u>
□Chairman	Nutrie.					
	Address:	□Vice Chairman				
			Address:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
□ Vice Chairman □ Director	Address:	☐ Vice Chairman	Address:			
☐ Vice Chairman ☐ Director ☐ President	Address:	□Vice Chairman □Director □President	Address:			
□ Vice Chairman □ Director □ President □ Vice President	Address:	□ Vice Chairman □ Director □ President □ Vice President	Address:			
□ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other	☐ Treasurer ☐ Other Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department	□ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other chment will be imagent of State Annual R	Address:ed for reporting peport form.	□Treasurer □Other ourposes only. N		
□ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other	☐ Treasurer ☐ Other Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department	□ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other chment will be image ant of State Annual R	Address:ed for reporting peport form.	□Treasurer □Other ourposes only. N		
□ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other □ Important Notice: individuals may be	Address:	□ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other chment will be image nt of State Annual R r Officer r 11 above) affirms to	ed for reporting peport form.	☐Treasurer ☐Other ourposes only. N	on-inde	xed

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



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

RETAIL CONSTRUCTION ASSOCIATES, 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 03/30/2016.

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: 08/31/2021 UBI Number: 603 603 255



Given onder my nand and the Seal of the State. of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

tim Ulyna

Date Issued, 08 +1 2021



September 14, 2021

JUSTIN CAMPBELL RETAIL CONSTRUCTION ASSOCIATES, INC. 12514 130TH LN NE KIRKLAND, WA 98034

SUBJECT: RETAIL CONSTRUCTION ASSOCIATES, INC.

Ref. Number: W21000124082

We have received your document for RETAIL CONSTRUCTION ASSOCIATES, INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator Letter Number: 721A00022093

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