F2200000399

(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:					

Office Use Only

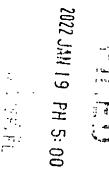


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2022 JAN 19 PM 2: 26

ALLAHASSEE, FLORIC



S. FRANKLIN JAN 2 0 2022

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 1/19/2022		*	*WALK IN**
ENTITY NAME STA	RK FOUNDATIONS INC.	<u> </u>	
			
DOCUMENT NUME	ER		. <u></u>
	PLEASE FILE THE ATTACHED AND RETURN	(
xxxxxxx	Plain Copy		
	Certified Copy	,	~2
	Certificate of Status		2022 JAN 19
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE	ENTITY	SE CO
	Certified Copy of Arts & Amendments	71,	00
	Certified Copy of Arts & Amendments Complete File (Inc.	luding Annual Reports)	
	Certificate of Status		
	Certificate of Status Reflecting:		.
	APOSTILLE' / NOTARIAL CERTIFICATION	V	
COUNTRY OF DESTI	NATION		
	ICATES REQUESTED		
TOTAL OWED \$ 70	ACCOUNT # I20160	0000072 G:	NC.
Please call Tina a	t the above number for any issues or concerns. T		

COVER LETTER

	stration Section sion of Corporations				
SUBJECT:	STARK FOUNDATIO	NS, INC.			
SOBJECT	N	ame of corporation -	must include suffi	х	
Dear Sir or M	1adam:				
"Certificate of	"Application by Forci of Existence," or "Certi need foreign corporation	ficate of Good Stand	ling" and check are	nsact Business submitted to re	in Florida," gister the
Please return	all correspondence cor	ncerning this matter	to the following:		
K. Brown					
		Name of F	Person		
Harbor Comp	liance				202
		Firm/Comp	рапу		2022 JAN 19
1830 Colonial	l Village Lane				
		Addre	SS		
Lancaster, PA	. 17601				7
		City/State ar	id Zip code		: 00
professional@	harborcompliance.com				,
	E-mail a	ddress: (to be used for	or future annual rep	ort noutication	,
For further in	nformation concerning	this matter, please ca	all:		
K.Brown		717 at (298-8128		
Nar	ne of Person	Area Code	Daytime T	elephone Numb	ner
Regi Divi The 241:	REET/COURIER ADI istration Section ision of Corporations Centre of Tallahassee 5 N. Monroe Street, Su ahassee, FL 32303		Registrati Division (P.O. Box	G ADDRESS: on Section of Corporations 6327 ec. FL 32314	
Enclosed is a Please make 6 \$70.00 F	\boldsymbol{c}	DA DEPARTMENT	OF STATE] \$78.75 Filing Fee Certified Copy	Cert	50 Filing Fee. tificate of Status & tified 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.

(Enter name of ec	rporation; must include "INCORPORA" rp," "Inc," "Co," or "Corp.")	TED." •	COMPANY," "CORPORATION	,
(If name unavaila	ble in Florida, enter alternate corporate r	iame ad	opted for the purpose of transacting	business in Florida)
Washington			6-4590730	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
03/25/2009		5		
(Date of incorporation)		(Date of duration, if other than perpetual)		
1/5/2021		_ _		
4400 NE 77th Av	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 e, Suite 275 Vancouver, WA 98662	iess in 1 i07.150	florida, if prior to registration) 2, F.S., to determine penalty liabilit	ry)
		al office	street address)	2022
	(Current	mailing	address, if different)	AH 19
. Name and stree	t address of Florida registered agent:	(P.O.	Box NOT acceptable)	19 PK
	et address of Florida registered agent: Registered Agents Inc.	(P.O.	Box NOT acceptable)	19 PM 5:
Name:		(P.O.	Box NOT acceptable)	19 PM 5: 00
	Registered Agents Inc.	(P.O.	Box NOT acceptable) Florida 33702	19 PM 5: 00

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 Agents Inc. Registered agent's signature) Bill Havre - Assistant Secretary

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

Chairman	Name:	□ Chairman	Name:	
□Vice Chairman	Address: 4400 NE 77th Ave, Suite 275	□Vice Chairman	Address:	
Director	Vancouver, WA 98662	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:	
DDirector		□Director		
]President		□President		
Vice President		□Vice President		
Secretary	Treasurer	□Secretary		□Treasurer
Other	Other	Other		Other
Chairman	Name:	- Chairman	Name:	2022 JAN
Vice Chairman	Address:	□ Vice Chairman	Address:	# t = = = = = = = = = = = = = = = = = =
Director		Director		9
President		□President		
Vice President		□Vice President		
Secretary	□Treasurer	Secretary		□Treasurer
Other	Other	Other		□Other
	Ise an attachment to report more than six (6). The added to the index when filing your Florida Dept			purposes only. Non-indexed
- /	Signature of Direct	ctor or Officer		· · · · · · · · · · · · · · · · · · ·

s.817.155, F.S.

13. Daniel Stark, President

The State of Washington

Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

STARK FOUNDATIONS, INC.

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 03/25/2009.

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 Then 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: 01/14/2022 UBI Number: 602 910 813

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

the R Hohlie

Steve R. Hobbs, Secretary of State

Date Issued, 01-14-2022