# F2200000146

	(Requestor's Name)
<del></del>	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
·	(Gueirana Faith Nama)
	(Business Entity Name)
	(Document Number)
Certified Conies	Certificates of Status
Certified Copies	
Special Instructions to	o Filing Officer:
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Office Use Only



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S. FRANKLIN FEB 2 5 2022

### Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

#### ORDER FORM

Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051 FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 2/24/2022	PRIORITY Regular Approval	OUR REF_#_(Order_ID#) 1003014
ORDER ENTITY		
·		2022 FEB
PLEASE PERFORM THE FOLLO MURRAYSMITH, INC. (FL)	WING SERVICES:	EB 21
File the attached foreign qualific	cation document	9 11
NOTES:		
\$70.00 Authorized	eminders: shawn.goodpaster@murraysmit	h.us-7
DETLIEN/ENDWARDING INST	PHOTIONS:	

Please bill the above referenced account for this order.

ACCOUNT NUMBER: I20050000052

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, February 24, 2022

# 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 or "Inc.," "Co.," "Co	orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	4
(If name unavails	ble in Florida, enter alternate corporate name add	opted for the purpose of transacting	business in Florida)
Oregon	3 93	-0768555	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
08/29/1980	5.		
(Date of incorporation)		(Date of duration, if other than perpetual)	
	(Date first transacted business in F	lorida, if prior to registration)	
388 SW 5th Aver	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 ue, Suite 1170, Portland, OR 97204-2025	2, F.S., to determine penalty liability	·)
388 SW 5th Aver	(SEE SECTIONS 607.1501 & 607.1502	2, F.S., to determine penalty liability	301.
388 SW 5th Aver	(SEE SECTIONS 607.1501 & 607.1502 ue, Suite 1170, Portland, OR 97204-2025 (Principal office	2, F.S., to determine penalty liability	2072 FEB
	(SEE SECTIONS 607.1501 & 607.1502 ue, Suite 1170, Portland, OR 97204-2025 (Principal office	2, F.S., to determine penalty liability  street address)  address, if different)	2022 FEB 24
	(SEE SECTIONS 607.1501 & 607.1502  ue, Suite 1170, Portland, OR 97204-2025  (Principal office  (Current mailing a	2, F.S., to determine penalty liability  street address)  address, if different)	2022 FEB 24
Name and stree Name:	(SEE SECTIONS 607.1501 & 607.1502  ue, Suite 1170, Portland, OR 97204-2025  (Principal office  (Current mailing and address of Florida registered agent: (P.O. 1992)	2, F.S., to determine penalty liability  street address)  address, if different)	2022 FEB
Name and stree	(SEE SECTIONS 607.1501 & 607.1502  ue, Suite 1170, Portland, OR 97204-2025  (Principal office  (Current mailing and address of Florida registered agent: (P.O. 100)  Unisearch, Inc.	2, F.S., to determine penalty liability  street address)  address, if different)	2022 FEB 24

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.

by: Shawn Linan, 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.

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS			Chris Rayasam
□ Chairman	Name: Sandeep Patil	_ Chairman	Name: 888 SW 5th Avenue, Suite 1170
☐Vice Chairman		_ □ Vice Chairman	Address:
Director	Houston, Texas 77084	Director	Portland, OR 97204-2025
□President		President	
□Vice President		□Vice President	
Secretary	Treasurer	☐ Secretary	□Treasurer
Chief Ex	xecutive Officer	Other Chief Op	perating Officer Dother
☐ Chairman	Aaron Fetzer	Chairman	Name:
□Vice Chairman	15310 Park Row	Ujce Chairman	Address:
□Director	Houston, Texas 77084	Director	
☐ President		President	2022
□Vice President		Vice President	- B - B
☐ Secretary	□Treasurer	Secretary	☐Treasurer
Other Chief F	inancial Officer Other	Other	Other S
☐Chairman	Name:	Chairman	Name:
□Vice Chairman	Address:	Uvice Chairman	Address:
□Director		Director	
□President			
□Vice President		□ Vice President	
☐ Secretary	Treasurer	□ Sccretary	☐ Treasurer
□Other	Other	Other	Other
individuals may b	Use an attachment to report more than six (6) to added to the index when filing your Florida	Department of State Annual R	ed for reporting purposes only. Non-indexed Report form.
12.	Signature of	Director or Officer	
The officer or dir		Lin number 11 shove) affirms t	that the facts stated herein are true and that he o tutes a third degree felony as provided for in

# State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

## Certificate of Existence 689H304W1

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

#### MURRAYSMITH, 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.

SHEMIA FAGAN, SECRETARY OF STATE

1/21/2022