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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

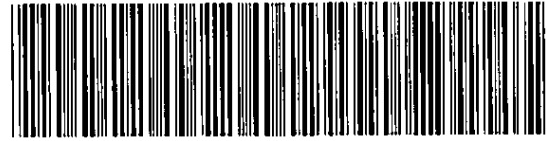
(Business Entity Name)

(Document Number)

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DATE: 11/17/22

NAME: FAL CREEK FARM AND NURSERY INC

TYPE OF FILING: APPLICATION

COST: 70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fall Creek Farm and Nursery, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Ryan W. Moore

Name of Person

Black Helterline LLP

Firm/Company

805 SW Broadway Ste 1900

Address

Portland, Oregon 97205

City/State and Zip code

sop@bhlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ryan W. Moore

at (503) 224-5560

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 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. Fall Creek Farm and Nursery, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Oregon 3. 93-0912421
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 18, 1986 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 39318 Jasper Lowell Road Lowell, OR 97452
(Principal office street address)
c/o Brian N. Dirks, 805 SW Broadway Ste 1900, Portland, OR 97205
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

2022 NOV 17 AM 10:30

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.

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

A. DIRECTORS

Chairman Name: Oscar Verges
 Vice Chairman Address: 39318 Jasper Lowell Road
 Director Lowell, OR 97452
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other Co-CEO _____ Other _____

Chairman Name: Cort Brazelton
 Vice Chairman Address: 39318 Jasper Lowell Road
 Director Lowell, OR 97452
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other Co-CEO _____ Other _____

Chairman Name: Denis Koh
 Vice Chairman Address: 39318 Jasper Lowell Road
 Director Lowell, OR 97452
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other CFO _____ Other _____

Chairman Name: Boris Aust
 Vice Chairman Address: 39318 Jasper Lowell Road
 Director Lowell, OR 97452
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other _____ Other _____

Chairman Name: David Brazelton
 Vice Chairman Address: 39318 Jasper Lowell Road
 Director Lowell, OR 97452
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other _____ Other _____

Chairman Name: Amelie Aust
 Vice Chairman Address: 39318 Jasper Lowell Road
 Director Lowell, OR 97452
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. _____
 Signature (CEO, 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.

13. Denis Koh, CFO
 (Typed or printed name and capacity of person signing application)

**ATTACHMENT TO THE
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

FALL CREEK FARM AND NURSERY, INC.

Additional Directors

DIRECTORS:

Roland Wolfram - 39318 Jasper Lowell Road, Lowell, OR 97452
Mark Frandsen - 39318 Jasper Lowell Road, Lowell, OR 97452
Elin Miller - 39318 Jasper Lowell Road, Lowell, OR 97452
Kevin Murphy - 39318 Jasper Lowell Road, Lowell, OR 97452
Tom Blaser - 39318 Jasper Lowell Road, Lowell, OR 97452

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 256172

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

FALL CREEK FARM AND NURSERY, INC.

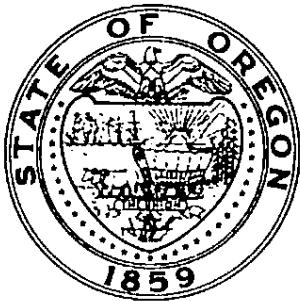
is

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.*



A handwritten signature in black ink, appearing to read "Shemia Fagan".

SHEMIA FAGAN, SECRETARY OF STATE

Issued Date: 11/10/2022



Come visit us on the internet at: <https://sos.oregon.gov/business>
or use the QR code to check their current status.