# F23000000186

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone #	
PICK-UP	TIAW	MAIL
(В	usiness Entity Name)	
(D	ocument Number)	
fied Copies	Certificates (	of Status
ecial Instructions to Fil	ing Officer.	
W23-2	1624	

Office Use Only



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APPROVILE



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JAN 1 2, 2023 K. Brumbley

### Sunshine State Corporate Compliance Company

# 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/09/2023		~WALK IN™
ENTITY NAME Aircare I	nternational, Ltd.	
DOCUMENT NUMBER_		<u> </u>
	**PLEASE FILE THE ATTACHED AND RETURN**	
xxxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
***	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	<del></del>
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINAT		
NUMBER OF CERTIFICA	TES REQUESTED	
TOTAL OWED \$70	ACCOUNT #: I20160000072	2
Please call Tina at th	be above number for any issues or concerns. Thank you so	mach!

#### **COVER LETTER**

	tration Section ion of Corporations			
SUBJECT:	AIRCARE INTERNATIONAL,	LTD.		
SOBJECT	Name of o	corporation -	must include suffix	
Dear Sir or M	adam:			
"Certificate o	"Application by Foreign Corpore f Existence," or "Certificate of ced foreign corporation to tran	Good Standi	ing" and check are submitt	
Please return	all correspondence concerning	this matter to	o the following:	
Amy Purdy				
	· · · · · · · · · · · · · · · · · · ·	Name of Po	erson	
SingleFile Tec	hnologies, Inc.			
		Firm/Comp	any	
113 Cherry St.	PMB 70875			
		Addres	S	
Seattle, WA 98	3104			
	(	City/State and	l Zip code	· <del>·</del>
jeff.r@aircarei				
	E-mail address: (	to be used for	r future annual report notif	ication)
For further in	formation concerning this matt	er, please cal	11:	
Amy Purdy	at	(	219-5402	
Nam	e of Person	Area Code	Daytime Telephone	e Number
Regis Divis The C 2415	EET/COURIER ADDRESS: stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING ADD Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on rations
	check for the following amour leck payable to: FLORIDA DEP. ing Fee	ARTMENT ( Fee &		§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.

	Corporation; must include "INCORPORATED," " [Corp." "Inc," "Co," or "Corp.")	COMPANY, "CORPORATION,	
AIRCARE IN	TERNATIONAL CORP		
(If name unava	tilable in Florida, enter alternate corporate name ado	pted for the purpose of transacting	business in Florida
Washington	3 91	-1812825	
(State or cour	3. 91 htry under the law of which it is incorporated)	(FEI number, if applicable)	
05/15/1997	5		
(Da	ate of incorporation)	(Date of duration, if other than perpetual)	
1/1/2023			
222 77 4	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502		y)
223 Tacoma A	(SEE SECTIONS 607.1501 & 607.1502 ve S, Tacoma, WA 98402 (Principal office	F.S., to determine penalty liability	y) 
	(SEE SECTIONS 607.1501 & 607.1502  ve S, Tacoma, WA 98402  (Principal office government of the second of the secon	F.S., to determine penalty liability street address) ddress, if different)	2023 JAN -9 AM 9:

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.

Bill Harve, 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.

A. DIRECTORS			
□Chairman	Name:	□Chai <del>r</del> man	Name:
□Vice Chairman	Address:	□Vice Chairman	Address: 223 Tacoma Ave S
□Director	Tacoma, WA 98402	□Director	Tacoma, WA 98402
□President		□President	
□Vice President		□Vice President	
☐Secretary	□Treasurer	☐ Secretary	□Treasurer
■Other CFO	Other	Other CEO	Other
□Chairman	Name:	□Chairman	Name:
		□Vice Chairman	Address:
	Address:		
□Director		□Director	
□President		□President	<del></del>
□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	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	Other
Important Notice: individuals may be /s/ Daniel Sp	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department oarkman	hment will be image nt of State Annual Ro	d for reporting purposes only. Non-indexed eport form.
- <del>-</del> ·	Signature of Director of	Officer	
The officer or dire she is aware that fa s.817.155, F.S.	ctor signing this document (and who is listed in number alse information submitted in a document to the Departr	11 above) affirms the ment of State constitu	nat the facts stated herein are true and that he or ites a third degree felony as provided for in
13. Daniel Spar	kman, CFO		<u> </u>



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** 

#### AIRCARE INTERNATIONAL, LTD.

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 05/15/1997.

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: 01/06/2023 UBI Number: 601 791 023

STATE OF WASHINGTON

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

to R Hollie

Steve R. Hobbs, Secretary of State

Date Issued: 01/06/2023