# F23000004355

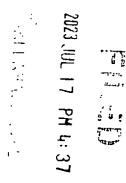
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600412250736

07/17/23--01019--021 \*\*70.00



## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SLIRI	ECT: Dari-Tech, Inc.			
3000		of corporation	- must include suffix	
Dear S	Sir or Madam:			
"Certi	nclosed "Application by Foreign Co ficate of Existence," or "Certificate referenced foreign corporation to to	of Good Stand	ding" and check are subm	
Please	return all correspondence concerni	ing this matter	to the following:	
Marler	ne Johnston			
-		Name of I	erson	
Dari-T	ech, Inc.			
	<del></del>	Firm/Com	pany	
8540 E	Benson Road			
	· <del></del>	Addre	SS	-
Lynder	n, WA 98264			
		City/State ar	nd Zip code	
marlen	e@daritech.com			
	E-mail address	s: (to be used fo	or future annual report no	tification)
For fu	rther information concerning this m	natter, please ca	all:	
Marlene Johnston 360		360 at (	) 354-6900 Daytime Telepho	
	Name of Person	Area Code	Daytime Telepho	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	
Please	ed is a check for the following amomake check payable to: <b>FLORIDA D</b> 0.00 Filing Fee	<b>EPARTMENT</b> ig Fee & □	OF STATE   \$78.75 Filing Fee &   Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

#### A: DIRECTORS Marlene Johnston Rvan J. DeWaard Name: □Chairman □ Chairman Address: 672 Beard Road, Lynden, WA 98244 1826 Pine Circle, Lynden, WA 962 □Vice Chairman Address: □Vice Chairman ■ Director Director □President □President ☐ Vice President □Vice President □Treasurer □ Secretary □Treasurer ☐ Secretary □Other \_ □Other Other □Other \_\_\_\_\_ □Chairman □ Chairman 9358 Double Ditch Rd, Lynden, WA 2748 E Badger Rd, Everson, WA Address: □ Vice Chairman □Vice Chairman Address: □ Director □ Director □President □ President ■Vice President ■ Vice President ☐ Treasurer ☐ Secretary □ Treasurer ☐ Secretary □Other \_\_\_ □Other \_\_\_\_\_ □ Chairman Name: \_\_\_\_ □ Chairman Name: \_\_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_ □ Director □ Director □President □President □Vice President \_\_\_\_\_ □Vice President ☐Treasurer □ Secretary □Treasurer ☐ Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ □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. Signature of 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. Marlene Johnston

## 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.

	orporation; must include "INCORPORATED," "orp." "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION	N."		
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting	ng business ir	ı Florida	<u>.</u>
Washington	3 9.	1-1583977			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)			_
8/26/1994	5				
(Date	of incorporation)	(Date of duration, if other than perpetual)			
I.					
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		ity)		
8540 Benson Ro					
8540 Benson Ro	ad, Lynden, WA 98264 (Principal office				_
, 8540 Benson Ro	ad, Lynden, WA 98264 (Principal office			-	
. Name and <u>stree</u>	(Principal office) (Current mailing a et address of Florida registered agent: (P.O. I	street address) address, if different)		2023 JUL	
. Name and <u>stree</u> Name:	ed, Lynden, WA 98264  (Principal office  (Current mailing a	street address) address, if different)	TALLYE	2023 JUL 17	; <u> </u>
3. Name and stree	et address of Florida registered agent: (P.O. I	street address)  address, if different)  Box NOT acceptable)	TALLYE	2023 JUL 17 PM կ։ 37	

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'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.

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

### DARI-TECH, 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 08/26/1994.

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: 07/03/2023

UBI Number: 601 452 263

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

the R Hobbe

Steve R. Hobbs, Secretary of State

Date Issued: 07/03/2023

