# F23000006458

(Requestor's Name)	_
·	
(Address)	_
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V. 33.1337	
	_
(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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## Sunshine State Corporate Compliance Company

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

DATE	**WALK IN**
ENTITY NAME DOU	GLAS BLOME ENGINEERING INC.
DOCUMENT NUMBE	R
	**PLEASE FILE THE ATTACHED AND RETURN**
xxxxxxxxxx	Plain Copy
	Certified Copy
	Certificate of Status
	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**
	Certified Copy of Arts & Amendments
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
	Certificate of Status
	Certificate of Status Reflecting:
	**APOSTILLE' / NOTARIAL CERTIFICATION**
	4710N
NUMBER OF CERTIFIC	PATES REQUESTED
TOTAL OWED \$ 70.0	O ACCOUNT # 120160000072
Please call Tina at	the above number for any issues or concerns. Thank you so much!

### **COVER LETTER**

TO:	Registration Section Division of Corpora				
SUBJ	ECT:	DOUGLA	S BLOME I	ENGINEERING INC.	
.,		Name of co	orporation -	- must include suffix	
Dear S	ir or Madam:				
"Certil		r "Certificate of C	Good Stand	outhorization to Transact Busin ling" and check are submitted t s in Florida.	
Please	return all correspond	ence concerning t	his matter t	to the following:	
			Cindy Will	iams	
	<u> </u>		Name of P	erson	·
			Harbor Com	ipliance	
		<del></del>	Firm/Comp	oany	
		183	0 Colonial V	fillage Lane	
			Addres	SS	
			Lancaster, P	A 17601	
		C	ity/State an	d Zip code	
		ewillia	ıms@harbor	compliance.com	
	F	-mail address: (to	be used fo	or future annual report notificat	ion)
For fu	ther information con	cerning this matte	r, please ca	II:	
Cindy	Williams	at (	717	844-9912	
	Name of Person		Area Code	Daytime Telephone Nu	imber
	STREET/COURIE Registration Section Division of Corpora The Centre of Talla 2415 N. Monroe Str Tallahassee, FL 32	n itions hassee reet, Suite 810		MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3234	ons
Please :	ed is a check for the tmake check payable to: .00 Filing Fee		RTMENT (	\$78.75 Filing Fee &	87.50 Filing Fee, Tertificate of Status & Tertified 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.

		<del></del> ;			<u> </u>	
(II name unavai	dable in Florida, enter alternate of WASHINGTON	corporate name ado	pted for the purpose of transacting b	ousiness in Piori	10a)	
Ctata as assess	try under the law of which it is it	3	(FEI number, if appli	blo)	<del></del>	
(State of Count						
(Date of incorporation)		5	(Date of duration, if other than perpetual)			
6.						
·			orida, if prior to registration) F.S., to determine penalty liability)			
7.	8509 154th Ave NE, #210 Redmond, WA 98052					
		(Principal office §	street address)			
		(Current mailing a	ddress, if different)		<del></del>	
8. Name and streen	<u>eet address</u> of Florida register Registered Agents Inc	ed agent: (P.O. B	Box <u>NOT</u> acceptable)	 !-	2023 HOV 30 PH 4: 4	3
Office Address:	7901 4th St N Ste 300		_		0 5	
	St. Petersburg	-	. Florida 33702	•	1 11	
	(City)		(Zip code)			
Having been nai designated in thi further agree to	is application, I hereby accep	nt the appointment f all statutes relai	of process for the above stated co t as registered agent and agree of tive to the proper and complete p on as registered agent.	to act in this c	apaci	ity. I
	/s/T	Pavid Robe	rta			
-	(Regi	stered agent's signa	iture)	-		

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

under the law of which it is incorporated.

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

A. DIRECTORS	,		
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address: 8509 154th Ave NE, #210	□Vice Chairman	Address: 8509 154th Ave NE, #210
⊠Director	Redmond, WA 98052	<b>☑</b> Director	Redmond, WA 98052
☑President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	<b>∠</b> Secretary	□Treasurer
□Other	□Other	□Other	□Other
□Chaicman	Max Harshman	□Chairman	Name:
	8509 154th Ave NE, #210	□Vice Chairman	Address:
☑Director	Redmond, WA 98052	Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	<b>⊻</b> 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
	Use an attachment to report more than six (6). The added to the index when filing your Florida Depa		
-			
1	/s/Arthur Signature of Direc	tor or Officer	<u></u>
	ctor signing this document (and who is listed in nu dsc information submitted in a document to the De		
13	Arthur Smith,	President	

# The State of Washington

# Secretary of State

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

### CERTIFICATE OF EXISTENCE

OF

### DOUGLAS BLOME ENGINEERING INC.

1 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 12/29/2000.

1 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.

1 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: 10/31/2023 UBI Number: 602 087 801

R Hollie



Kerese -

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

Steve R. Hobbs, Secretary of State

Date Issued: 10/31/2023