# F24000004211

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#### **COVER LETTER**

TO: Registration Se Division of Con					
SUBJECT: Otak, Inc.					
	Name of corporat	ion - must include suffi	X		
Dear Sir or Madam:					
"Certificate of Existence	ion by Foreign Corporation f e," or "Certificate of Good S in corporation to transact bus	tanding" and check are			
Please return all corresp Lisa Duffus	oondence concerning this ma	ter to the following:			
	Name	of Person			
Otak, Inc.					
	Firm/C	ompany			
808 SW 3rd Ave., STE 8	00				
	Ac	ldress			
Portland, OR 97204					
	City/Stat	e and Zip code			
contracts@otak.com					
	E-mail address: (to be use	ed for future annual repo	ort notification)		
For further information	concerning this matter, pleas	se call:			
Lisa Duffus	503 at (	287-6825	Daytime Telephone Number		
Name of Perso	on Area C	Tode Daytime To	elephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration of Division of P.O. Box (	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for Please make check payab ☐ \$70.00 Filing Fee	the following amount: le to: FLORIDA DEPARTMF  \$78.75 Filing Fee & Certificate of Status	NT OF STATE  □ \$78.75 Filing Fee of Certified Copy	&  \[ \Boxed{\Boxes} \$87.50 \text{ Filing Fee,} \\ \text{Certificate of Status } \delta \\ \text{Certified Conv.} \end{\Boxes}		

#### 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.

	, "COMPANY, "CORPORATION,			
ole in Florida, enter alternate corporate name	adopted for the purpose of transacting bu	isiness in Florida		
3.	93-0788869	-0788869		
under the law of which it is incorporated)	(FEI number, if applic	(FEI number, if applicable)		
5.	Perpetual	rrpetual		
of incorporation)	(Date of duration, it other than	(Date of duration, if other than perpetual)		
STE 800, Portland, OR 97204 (Principal of)	lice <u>street</u> address)			
	<u> </u>	2024 AUS -2		
Jacksonville	32202	Ξ?		
(City)	(Zip code)	4: S		
	ple in Florida, enter alternate corporate name  3.  under the law of which it is incorporated)  (Date first transacted business (SEE SECTIONS 607.1501 & 607.1 STE 800, Portland, OR 97204  (Principal off (Current mail)  address of Florida registered agent: (P. LEGALINC CORPORATE SERVICES IN 476 Riverside Ave.  Jacksonville	oble in Florida, enter alternate corporate name adopted for the purpose of transacting be 3, 93-0788869  under the law of which it is incorporated)  (FEI number, if applie 5, Perpetual  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  STE 800, Portland, OR 97204  (Principal office street address)  (Current mailing address, if different)  address of Florida registered agent: (P.O. Box NOT acceptable)  LEGALINC CORPORATE SERVICES INC.  476 Riverside Ave.  Jacksonville  Florida 32202		

olace rity. I irther 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.

John Moseley, Asst. Secretary on behalf of Legaline Corporate Services Inc.

(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. birectors						
□Chairman	Raul Aviles Jr Name:	□Chairman		ee		
□Vice Chairman	Address: 808 SW 3rd Ave., STE 800	□Vice Chairman	Address:	8 SW 3rd Ave., STE 800		
□Director	Portand, OR 97204	□Director	Portand, Ol	R 97204		
■ President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	□Secretary		□Treasurer		
□Other		Interim (	FO ———	□Other		
□Chairman □Vice Chairman □Director	Scott Dreher Name:  808 SW 3rd Ave., STE 800 Address:  Portand, OR 97204	□Chairman □Vice Chairman □Director	Address:			
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	□Secretary		□Treasurer		
©OO COO	□Other	□Other		□Other		
□Chairman □Vice Chairman	Name:	□Chairman □Vice Chairman				
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary		□Treasurer		
□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.  12. 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 of 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. Scott Dreher, COO, Otak. Inc.

## State of Oregon

OFFICE OF THE SECRETARY OF STATE

Corporation Division

### Certificate of Existence 3166972

I, LAVONNE GRIFFIN-VALADE, SECRETARY OF STATE and Custodian of the Seal of said State, do hereby certify:

OTAK, 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.

Lavonne Orifin-Valade

LAVONNE GRIFFIN-VALADE, SECRETARY OF STATE

Issued Date: 5/9/2024



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