# F24000004398

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





500433798125

2024 AUG 20 PH 5: 57

2024 AUG 20 PM 3

7,05 2 0 **2024** IC Brumbley



Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

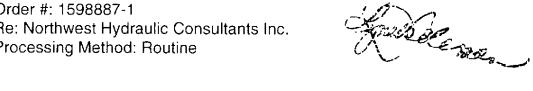
To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 08/20/24 Order #: 1598887-1

Re: Northwest Hydraulic Consultants Inc.

Processing Method: Routine



### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:

120000000195

Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

_	tration Section ion of Corporations			
SUBJECT:	Northwest Hydraulic Consu	Itants Inc.		
	Name	of corporation	- must include suffix	
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign C f Existence," or "Certificat ced foreign corporation to	e of Good Stan	ding" and check are subi	
Please return :	all correspondence concerr	ning this matter	to the following:	
Diane Numrich	1			
		Name of I	Person	
Northwest Hyo	fraulic Consultants Inc.			
		Firm/Com	pany	-
12787 Gateway	y Dr S			
		Addre	SS	
Tukwila WA 9	8168			
		City/State ar	nd Zip code	
dnumrich@nho				
	E-mail addres	s: (to be used f	or future annual report n	otification)
For further inf	formation concerning this r	natter, please c	all:	
Diane Numrich		206 at (	436-5508	
Name	e of Person	Area Code	Daytime Teleph	one 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	
	check for the following ameck payable to: FLORIDA Dong Fee	EPARTMENT og Fee &	OF STATE \$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.

•	able in Florida, enter alternate corporate name ad		-	
Washington (State or country under the law of which it is incorporated)		91-1113093		
	y under the law of which it is incorporated)	(FEI number, if a	applicable)	
07.09.1979	of incorporation) 5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		Tiny)	
12787 Gateway I	·	z, r.s., to determine penalty haor	mry)	
	Or S Tukwila WA 98168  (Principal office	etreat address)		
	(Frincipal office	street address)		
	(Current mailing	address, if different)		
	, ,	,	024	
Name and stree	et address of Florida registered agent: (P.O. 1	Box NOT acceptable)	2024 AUG 20	
XI.	Corporation Service Company		20	
Name:	100111 - 0			
	1201 Hays Street		2	
ffice Address:				
ffice Address:	Tallahassee	, Florida(Zip code)	57	

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]:

(Registered agent's signature)

Bruce Walsh ime:  30 Gostick Pl ddress:						
30 Gostick Pl ddress:						
forth Vancouver BC V7M 3G3						
□Treasurer						
Other						
ame:						
ddress:						
. <u>.</u>						
□Treasurer						
Other						
ame:						
ddress:						
<u></u>						
<del></del>						
Treasurer						
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 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.



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** 

#### NORTHWEST HYDRAULIC CONSULTANTS 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 07/09/1979.

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: 08/19/2024 UBI Number: 600 369 474

R Hohlie

- AND SAFO

STATE ON WASHING THE STATE OF T

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

Steve R. Hobbs, Secretary of State

Date Issued: 08/19/2024