Mair 10 P.O. Box 5828 TALLAHASSIT EL 32114

ACCOUNT NO. : 072100000032

REFERENCE

542042

10248

AUTHORIZATION

COST LIMIT : 9 70.00

*:3000064409423

ORDER DATE: February 14, 1995

ORDER TIME : 11:32 AM

ORDER NO. : 542942

CUSTOMER NO:

10248

CUSTOMER: Louis L. Hamby, Iii, Esq.

Alley Mands Rogers & Lindsay,

321 Royal Poinciana Plaza

P. O. Box 431

Palm Beach, FL 33480

FOREIGN FILINGS

NAME:

OHA, INC.

XX PROFIT NON-PROFIT

CORPORATE

LIMITED PARTNERSHIP

XX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea Hamilton

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:

1QUA, Inc.	
(Name of corporation; must include the word TMCODOAT	
abbreviations of like import in language as will clearly indi	Cate that it is a corporation or wirds or
(Name of corporation: must include the word INCORPOR abbreviations of like import in language as will clearly indicor partnership if not so contained in the name at present.)	nostrot a corporation introduct in natural porson
2. Wash ington (State or country under the law of which it is incorporated)	
(Statu or country under the faw of which to be become	3,applied for
1 1/10/05	(FEI number, if applicable)
4. 2/16/95 5. (Date of Incorporation) 5. (Dura	perpetual
(Data of incorporation) (Dura	don: Year curp, will cease to exist or meruphial?
6. <u>2/21/95</u>	the same of the transfer to
G. 2/21/95 (Date first transacted business in Florida, (See sections 607.16)	01 007 1507
7 0420 5 5 5200	01, 007, 1902, and 817,155, F.S.J
7. 9428 S.E. 52nd	
Morcor Island WA 00040	<u> </u>
Mercer Island, WA 98040 (Current mailing address)	
(Current mailing address)	
0	
8. serve as general partner of a limited part	nership (JLM Associates Limited Partnership)
(f'urpose(s) of corporation authorized in home state or co	ountry to be carried out in the state of Floridation
Name and street address of Florida register	ed agent:
	- -
Name: Louis L. Hamby III	
Office Address: 321 Royal Poinciana	Dlaga
Office Addiess:	- Flaza
Palm Boach	
TATHI BOICH	, Florida ,33480
	(Zip Code)
10. Registered agent's acceptance:	
Having ham many t	
Having been named as registered agent and to accomporation at the place designated in this application.	ept service of process for the phone
corporation at the place designated in this application of all states and agree to act in this capacity. I	ition, I hereby accept the appointment
UI UII SUNIIIIOS POINTAINA AN AL-	""' " " " USTOO O COMOOV WAN MA ARAISAIS
of all statutes relative to the proper and complete pe with and accept the obligations of my position as rec	erformance of my duties, and I am familiar
with and accept the obligations of my position as reg	pistered agent.
- 10285 1 Hand	Ь
(Registered agent's signature	117 - 4
delivery of the	anticated not
11. Attached is a certificate of existence duly authorized of this application to the Department of State, having custody of corporate records in the jurisdiction	by the Secretary of Carry
having custody of corporate records in the jurisdiction	under the law of which is or other official

having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Numes and addresses of officers and/or directors:

DIRECTORS

Chairman	:Jon_E. Marshall
Address:	9428 S.E. 52nd
	Morgar Island, WA 98040
Vice Chal	rman: N/A
Address:	
Director: _	N/A
Director: _	N/A
OFFICERS	
President:	Jon E. Marshall
	9428 S.E. 52nd
_	Morcor Island, WA 98040
	iant: Leon Moore
Address: _	1614 Summit, Suite 505
	Scattle, WA 98122
Secretary:	Leon Moore
	1614 Summit, Suite 505
	Scattle, WA 98122
Treasurer:	Jon E. Marshall
Address:	9428 S.E. 52nd
	Mercer Island, WA 98040

NO g additional officers

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jon E. Marshall, President
(Typed or printed name and capacity of person signing application)



STATE of WASHINGTON SECRETARY OF STATE

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

QIIA, INC.

I, RALPH MUNRO, Secretary of State of the State of Washington, hereby certificathat I am the custodian of the corporation records of this state.

I FURTHER CERTIFY that the records on file in this office show that the above - named profit corporation was incorporated under the laws of the State of Washington and was issued a certificate of incorporation in Washington on February 10, 1995

I FURTHER CERTIFY that as of the date of this certificate no Articles of Dissolution or Certificate of Withdrawal have been fi'ed, that the conditions of the Revised Code of Washington, Title 23B.01.280(2) (a) through (d) have been met, and the corporation is duly authorized to transact business in the corporate form in the State of Washington.

Date February 15, 1995 Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol

L. Cramer