	n of Corporations  3RITT CORPORATION  (Name of corporation - must include suffix)
	(Name of corporation - must meridde sunix)
Dear Sir or Mad	lam:
The enclosed "A "Certificate of I transact busines	Application by Foreign Corporation for Authorization to Transact Business in Florida Existence", and check are submitted to register the above referenced foreign corporation in Florida.
Please return al	correspondence concerning this matter to the following:
	D. KELLY BRITT (Name of Person)
	(Name of Person)
	Date Carranta
	BRITT CORPORATION
	(Firm/Company)
	(Firm/Company) 23008 52nd Ave W
	(Firm/Company)

### **COURIER ADDRESS:**

Qualification/Tax Lien Section **Division of Corporations** 409 E. Gaines St. Tallahassee, FL 32399

### **MAILING ADDRESS:**

Qualification/Tax Lien Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

## 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 (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) WASHINGTON (FEI number, if applicable) (State or country under the law of which it is incorporated) in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Current mailing address) (Purpose(s) of corporation authorized in home state-or country to be carried out in state of 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: 10. Registered agent's acceptance: 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.

11. 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.

Registeredi agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: Address: Vice Chairman: Address: Director: KELLY BRITT Address: 23008 AUE W TERRACE, WA 98043 BRITT Director: DS 180 RS Address: 23009 AUE W Mountlake Terrace, WA 98043 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: KELLY Address: 23009 MOUNTLAKE TERRACE, WA 98043 Vice President: 1)912069 AVE W 100nHake TERRACE, WA 98043 Address: Treasurer: DEIRDRE BRITT Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

### STATE of WASHINGTON



# SECRETARY of STATE

I, RALPH MUNRO, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

### CERTIFICATE OF EXISTENCE/AUTHORIZATION

**OF** 

#### **BRITT CORPORATION**

I FURTHER CERTIFY that the records on file in this office show that the above named profit corporation was formed under the laws of the State of Washington and was issued a Certificate of Incorporation in Washington on July 7, 1997.

I FURTHER CERTIFY that as of the date of this certificate, no Articles of Dissolution have been filed, and that the corporation is duly authorized to transact business in the corporate form in the State of Washington.



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



Kaiph Munto, Secretary of State