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

SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
08 MAR 13 PH 3: 47

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

	echnologies LLC ted Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida				
Please return all correspondence concerning this matter to the following:				
D Pham	-			
(Nar	ne of Person)			
550 KIRKLI	WY WAY 1 403  MCCompany)  OR SECRET			
(Fire	n/Company)			
KIRKLAND	WA 98033  (Address)  73 PH STATE  (Address)			
KIRKLAND WA 98033  (Address)  PA STATE				
Shee Atika	Technologies LLC  ite and Zip Code)			
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Q Pham (Name of Person)	at ( <u>425</u> ) <u>284-1479</u> (Area Code & Daytime Telephone Number)			
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount:  \$\Begin{align*} \\$125.00 \text{ Filing Fee} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\				



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2008

Q, PHAM SHEE ATIKA TECHNOLOGIES LLC 550 KIRKLAND WAY #403 KIRKLAND, WA 98033

SUBJECT: SHEE ATIKA TECHNOLOGIES LLC

Ref. Number: W08000011021

We have received your document for SHEE ATIKA TECHNOLOGIES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 608A00013140

Joey Bryan Regulatory Specialist II s. y

SECRETARY OF STATIONS
SECRETARY CORPORATIONS
ON MAR 13 PM 3: 47

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	SECTION 608.503, FLORIDA STATUTES ANY TO TRANSACT BUSINESS IN THE S		BMITTED TO REGISTEI	R A FOREIGN
(Name of Foreign )	Hika Technologies Limited Liability Company; must include	e "Limited Liability Compa	ny," "L.L.C.," or "LLC.	")
(If name unavailable, ente	r alternate name adopted for the purpose r managing members adopting the altern	of transacting business in F	Florida and attach a copy ne must include "Limited	of the written I Liability
Company," "L.L.C.," "LL	C.")			,
2. Ala	aw of which foreign limited liability 3.	20-27	44091	
(Jurisdiction under the company is organized)	aw of which foreign limited liability	(FEI numbe	r, if applicable)	- SEC
	1200	Pa .L.	. 0	5 器。
4. 4. (Date of	2005 Organization) 5.	(Duration: Year limited I	iability company will ce	asoto Car
		exist or "perpetual")		PASS
6	(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	ida if neior to registration		جيد بي
	(See sections 608.501 & 608.502 F.S. t	o determine penalty liability	<b>'</b> )	与影
7. 55C	KIRKLAND WAY A	403		
K/K/	(Street Address of	S > f Principal Office)		<del></del>
			•	
8. If limited liability	company is a manager-managed c	ompany, check here	J	
9. The name and usua	l business addresses of the manag	ging members or manag	gers are as follows:	
Ham Cain	550 VIEVINIA 1/4V +	407 VIRVIAND	UA 98077	
-tlarry Spes	- JO HINCORD WITH 4	40) KIRLUAND,	<u>wir 78-33</u>	<del></del>
Robert Loiselle				
Ruce Strong ho	550 KIRKLAND WAY *			
10(5) 7/10/2000	7			
	certificate of existence, no more than 90 da		-	
•	w of which it is organized. (A photocopy under oath of the translator must be submi	•	cate is in a foreign langua	age, a
udisance of the continent	in and condition the deliberation france occurrent	meer,	<i></i>	1
11. Nature of busines	s or purposes to be conducted or p	promoted in Florida: _	Engineering.	<u>rnd</u>
Talinia P	Cerricas		0	
	611			<u></u> ·
		ares		
	Signature of a member or an auth (In accordance with section 608.408(3), F.S			
	an affirmation under the penalties of perjur	y that the facts stated herein ar		
	HARRY SPI		<u></u>	
	Typed or printed i	iaine oi signee		

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:  Shee Alika Technologies LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	SECRETAR VISION OF VISION OF
InCorp Services, Inc.	ED STA CORPORA CORPORA 3 PH 3
17888 - 67 Court N Florida Street Address (P.O. Box NOT ACCEPTABLE)	3: 47
Loxahatchee FI 33470  City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Ian Eastmond on behalf of Incorp Services, Inc.
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Alaska Entity # 92983

# State of Alaska Department of Commerce, Community, and Economic Development

# CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

#### SHEE ATIKA TECHNOLOGIES, LLC

on the 8th day of April, 2005 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 10th day of March, 2008.

Amis notti

Emil Notti Commissioner

Certification Number: 258913-1

Verify this certificate online at https://myalaska.state.ak.us/business/soskb/verify.asp