Division of

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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E

Foreign Limited Liability Company MCKINSTRY ESSENTION, LLC

Certificate of Status	0
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B. BOSTICK

Electronic Filing Menu

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1/23/2013

PAGE 01/05

CT CORPORATION

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	CT:	McKinstry Essention, LLC	
		Name of Limited Liability Company	
The end Existen	closed "Application by Foreign Limited ce, and check are submitted to register t	Liability Company for Authorization to Transact Business in the above referenced foreign limited liability company to tran	n Florida," Cortificate of usect business in Florida.
Please i	return all correspondence concerning thi	s matter to the following:	
	Margaret Arne	sen	· ·
	<u> </u>	Name of Person	
	McKinstry Esse	ention LLC	
		Firm/Company	
	5005 3rd Ave S		-
		Address	
	Seattle, WA 98	134	
		City/State and Zip Code	·· -
	marqareta@mcki	netro com	•
		s: (to be used for future annual report notification)	— ♥ ω →
For furt	her information concerning this matter,		SECRE
	Margaret Arnesen	at(206) 832~8316	23
	Name of Person	Area Code & Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	M 8:51
	Registration Section	Registration Section	音点 5
	P.O. Box 6327 Tailahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301	A
	ed is a check for the following an \$125.00 Filing Fee \$130.00 Filing Certificate of	g Fee &\$155.00 Filing Fee &\$160.00 Filing Fee,	

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	McKinstry Essention, LLC	
1.	Lisability Company, "L.L.C.," or "LLC.")	
ÇØ	Fname unavailable, cuter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writter insent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability impany," "L.L.C," "LLC.")	ì
2.	Washington 3. 46-1363231 (Surisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4.	12/14/2012 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	Upon Qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	5005 3rd Ave S., Seattle, WA 98134	
	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(Street Address of Principal Office)	1
8.	If limited liability company is a manager-managed company, check here The name and usual hydraces and describes addresses of the manager or managers are as followers.	
9.	The name and usual business addresses of the managing members or managers are as follows:	Ţ
	Dean C. Allen, 5005 3rd Ave S., Seattle, WA 98134	
	Douglas J Moore , 5005 3rd Ave S., Seattle, WA 98134	
	Bill Teplicky, 5005 3rd Ave S., Seattle, WA 98134	
Úх	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in cjurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a uslation of the certificate under cath of the translator must be submitted.)	
1]	. Nature of business or purposes to be conducted or promoted in Florida:	
	Construction Management & Facility Management	
	NCK	
	Signature of a member of an authorized representative of a member.	
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of penjury that the facts stated herein are true. I am aware that any 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.)	
	Dean C. Allen	
	Typed or printed name of signee	

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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.

McKinstry Essention, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
A Section 1
CT Corporation System (Name) AF AN T
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation FL 33324 City/State/Zip P. 5

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.

C T Corporation System

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

MCKINSTRY ESSENTION, LLC

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of WA and was issued a Certificate Of Formation in Washington on 12/14/2012.

I FURTHER CERTIFY that as of the date of this certificate, MCKINSTRY ESSENTION, LLC remains active and has complied with the filing requirements of this office.

Date: January 18, 2013

UBI: 603-259-907

STATE ON WASHINGTON TO THE STATE OF THE STAT

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

Kim Wyman, Secretary of State