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(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
(Only States Elph Holle 11)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		

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COVER LETTER

TO:

Registration Section **Division of Corporations**

SUBJECT: NWE8, LLC,
Name of Limited 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:
Spencer B. Siegel, Esq.
Name of Person
Siegel Siegel & Wright
Firm/Company
1600 South Dixie Highway Suite 300
Address
Boca Raton, FL 33432
City/State and Zip Code
sbsiegel@teamsiegel.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Spencer B. Siegel, Esq. at 561 620-8200
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy



IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. NWE8, LLC.		
(Name of Foreign Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC.")	
If name unavailable, enter alternate name adopted for the purpose of transacting buildily Company," "L.L.C," or "LL.C.")	usiness in Flor da. The alternate name must includ	e "Limited
2. Oregon 3.		
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
N/A		
(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to dete	rior to registration.)	
2250 NW FLANDERS ST, Suite Garde		
Portland, OR 97210		
(Street Address of Principa	l Office)	
Same		
		
(Mailing Address)	2:00	
7. The name, title or capacity and address of the person(s) who	o has/have authority to manage is/are	0
Jahler Den ett. A. C.		') C
Bobby Barnett MGRM		
	بران در از	
	<u> </u>	3
		<u>)</u>
Attached is an original certificate of existence, no more than aving custody of records in the jurisdiction under the law of we compared the certificate is in a foreign language, a translation ust be submitted)	hich it is organized. (A photocopy is	not
Signature of an authoriz a accordance with section 605,0263, F.S., the execution of this document constitutes an affirm a ware that any false information submitted in a document to the Department of State const	rmation under the penalties of perjury that the facts state	ed herein are true , F.S.)
Bobby Barnett		
Typed or printed name of	`signee	

Robert Barnett, Vice President of Manager Red Hills Holdings, Manager of NWES ILLC



PURSUANT TO THE PROVISIO. 605.0113 or 605.0902 (1)(d), 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:

NWE8, LLC.

If unavailable, the alternate to be used in the state of Florida is:

NWE8 Florida, LLC.

2. The name and the Florida street address of the registered agent and office are:

Spencer B. Siegel

(Name)

1600 South Dixie Highway Suite 300

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Boca Raton

33432

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 $\frac{\Gamma_{ij}}{G_{ij}}$ 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 605, Florida Statutes.

\$ 100.00

Filing Fee for Application

\$ 25.00

Designation of Registered Agent

\$ 30.00

Certified Copy (optional)

\$ 5.00

Certificate of Status (optional)

State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

Certificate of Existence 350Q217B4

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

NWE8, LLC

is

Organized

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

KATE BROWN, Secretary of State

8/19/2014