

41500003776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

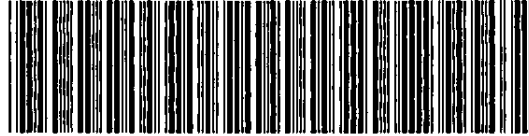
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 MAY 11 AM 7:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 15 2015



05/07/15

Application for Foreign LLC

Enclosed is our application to register in Florida as a Foreign Limited Liability Company.

I have included the application, Certificate of Existence and a check for \$160.00.

If there is more information required please contact me at 503-518-8800.

Thank you,

A handwritten signature in black ink, appearing to read 'Rene' Christensen', is written over a large, horizontal, oval-shaped line.

Rene' Christensen

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: West Wind Reinforcing, 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:

Rene Christensen
Name of Person

West Wind Reinforcing, LLC
Firm/Company

19142 S. Molalla Ave. Suite B
Address

Oregon City, OR 97045
City/State and Zip Code

rchristensen@westwindreinforcing.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rene Christensen at (503) 518-8800
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 &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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

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. Westwind Reinforcing, 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 business in Florida. The alternate name must include "Limited
Liability Company," "L.L.C.," or "LLC.")

2. Oregon 3. 46-0887741
(Jurisdiction under the law of which foreign limited liability
company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 19142 S. Molalla Ave. Suite B
Oregon City, OR 97045
(Street Address of Principal Office)

6. 19142 S. Molalla Ave Suite B
Oregon City, OR 97045
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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.

Mai Lou Her, Mai Lou Her, ASST VP
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Donald Evanston, President - 19142 S. Molalla Ave. Ste B Oregon City, OR
Warren Baldridge, Vice President - 19142 S. Molalla Ave. Ste B Oregon City, OR

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath
of the translator must be submitted)

DA Evanston

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury 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.)

Donald Evanston
Typed or printed name of signer

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 630D506H4

I, ROBERT TAYLOR, DEPUTY SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

WEST WIND REINFORCING, 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.

FILED
15 MAY 11 AM 7:53
SECRETARY OF STATE
JAIL ANASSEL FLORES



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

A handwritten signature in black ink, appearing to be 'RT' or 'Robert Taylor', is written over a horizontal line.

ROBERT TAYLOR, DEPUTY SECRETARY OF STATE

3/5/2015