

M15000007874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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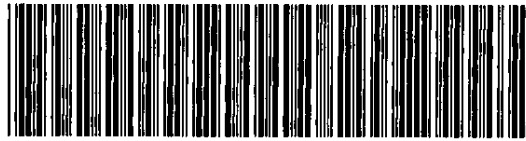
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF COURT
JUDICIAL DISTRICT
NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

FILED

2015 OCT -1 A 11:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 02 2015

S MASON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Imagenet 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:

Carl Sandvik

Name of Person

Imagenet LLC

Firm/Company

6411 S. 216th Street

Address

Kent, Washington 98032

City/State and Zip Code

csandvik@Imagenetllc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carl Sandvik

Name of Contact Person

at (**253**)

Area Code

508-1554

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. Imagenet LLC.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- Imagenet of Tampa 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. Washington 3. 47-0885172
(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. _____
- 5401 W Kennedy BLVD Ste 150
(Street Address of Principal Office)
6. Tampa, FL 33609
- 5401 W Kennedy BLVD Ste 150, Tampa, FL 33609
(Mailing Address)

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

Name: Capitol Corporate Services, Inc.

Office Address: 155 Office Plaza Dr Ste. A

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 limited liability company 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.

Dorian Case asst. Sec.
(Registered agent's signature)

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

Chris Belvin, Production Manager

5401 W Kennedy BLVD Ste 150

Tampa, FL 33609

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)

Michael Spain
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Michael Spain

Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 OCT - 1 A 11:38

FILED

UNITED STATES OF AMERICA

The State of Washington



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
IMAGENET 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 7/23/2002.

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

Date: September 16, 2015

UBI: 602-222-379



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

Kim Wyman, Secretary of State