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COVER LETTER

	Registration Section Division of Corporations			
SUBJEC	Triton Technical LLC			
	Name of	Limited Liability Company	•	
The enclo	osed "Application by Foreign Limited Liability Com e, and check are submitted to register the above refer	pany for Authorization to Transact Business in Florida, enced foreign limited liability company to transact busing	" Certificate of ness in Florida.	
Please re	turn all correspondence concerning this matter to the	following:		
	David Denchik			
	N	ame of Person	•	
	Triton Technical LLC			
Firm/Company				
	530 Industry Drive			
		Address	-	
	Seattle, WA 98188			
	City/S	tate and Zip Code	•	
	davidd@tritontechnical.com			
	E-mail address: (to be use	d for future annual report notification)	•	
For further	er information concerning this matter, please call:	TAL	20	
_	David Denchik	206 453-6120 ext. 101 25 at ()	NOV ZES	
	Name of Contact Person	Area Code Daytime Telephone Number	IL	
Ī	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	円 50 元 50	
	is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & \$160.00 Filing Fee, C Certified Copy of Status & Certified Co	ertificate py	

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:

Liability Company," "L.L.C,	·		rnate name mus	t include "	Limited
Washington State, King	of which foreign limited liability 3. $\frac{2}{2}$	01443138 (FEI number, if ap	nlicable)		
company is organized)		(- 21 manovi, ii up	,p.1.4,		
1. 09/21/2015	(Date first transacted business in Flor	ide if prior to registration			
	(See sections 605.0904 & 605.0905, F.S	to determine penalty liability)			
5. 530 Industry Drive					
Seattle, WA 98188					
	(Street Address of Principal C	Office)			
5. 530 Industry Drive					
Seattle, WA 98188			Z.c	29	
	(Mailing Address)		FS	<u> </u>	
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	AH/	2015 NOV	
Name:	Scott Horne		SS.	•	
	2143 NE 17th Ave		Fig.	2 F	П
Office Address:				T 53	D
	Wilton Manors	, Florida 33305	<u> </u>	2; 5	
Registered agent's accep	(City)	(Zip c	code)	Ö	
esignated in this applica	gistered agent and to accept service of pr tion, I hereby accept the appointment as ons of all statutes relative to the proper a	registered agent and agree to a nd complete performance of m	ect in this cape	acity. I fu	erther ag
o complywith the provision	my position as registered agent.				
o complywith the provision	my position as registered agent. (Registered agent	's signature)			
o complywith the provision of the control of the colligations of the colligations of the colligation of the collins of the col	my position as registered agent.	-			
o complywith the provision country the obligations of the obligations of the country that the country the country that the co	(Registered agent) (Registered agent) acity and address of the person(s) who has	-	::		
o complywith the provision of incept the obligations of i	(Registered agent) (Registered agent) acity and address of the person(s) who has	-	:		
o complywith the provision of the obligations of th	(Registered agent) (Registered agent) acity and address of the person(s) who has	-	:		
8. The name, title or capa David Denchik, CEO Jason Suit, Director of En	(Registered agent acity and address of the person(s) who has gineer of existence, no more than 90 days old, drof which it is organized. (If the certificate abmitted)	have authority to manage is/are	having custoo	ly of reco	rds in the under oa
8. The name, title or capa David Denchik, CEO Jason Suit, Director of En	(Registered agent (Registered agent acity and address of the person(s) who has gineer of existence, no more than 90 days old, do of which it is organized. (If the certificate abmitted)	/have authority to manage is/are	having custoo	ly of reco	rds in the under oa
8. The name, title or capa David Denchik, CEO ason Suit, Director of Endata Attached is a certificate urisdiction under the law of the translator must be such this document is executed.	(Registered agent (Registered agent (Registered agent acity and address of the person(s) who has gineer of existence, no more than 90 days old, do of which it is organized. (If the certificate abmitted) Signatur of an author accordance with section 605.0203 (1) (Thave authority to manage is/are ally authenticated by the official is in a foreign language, a trans officed person b). Florida Statutes, I am aware	having custod lation of the co	ertificate	under oa
8. The name, title or capa David Denchik, CEO Jason Suit, Director of End. Attached is a certificate urisdiction under the law of the translator must be sufficiently the suit of the suit of the translator must be sufficiently the suit of the sui	(Registered agent acity and address of the person(s) who has gineer of existence, no more than 90 days old, do of which it is organized. (If the certificate abmitted)	Thave authority to manage is/are ally authenticated by the official is in a foreign language, a trans officed person b). Florida Statutes, I am aware	having custod lation of the co	ertificate	under oa

Typed or printed name of signee



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 TRITON TECHNICAL 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 8/6/2004.

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

Date: September 22, 2015

UBI: 602-345-232

STATE OF WASHING IN 1889 NO.

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

Kim Wyman, Secretary of State