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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 17, 2016

STEVEN LEMMA 7724 SE ASPEN SUMMIT FRIVE #300 PORTLAND, OR 97266

SUBJECT: CHYP, LLC

Ref. Number: W16000035750

We have received your document for CHYP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please calk (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 016A00010353

www.sunbiz.org

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

IN FLORIDA	
IN COMPLIANCE WITH SECTION (05.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FO	DREIGN LIMITED LABILITY
COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CHYP, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	16.3
(State of Foreign Emitted Liscotty Company, must menute Translet Capatity Company, E.E.C., or E	tt.)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Liability Company," "L.L. C." or "LLC.")	must include "Limited
2 STATE OF OREGON 3 81-2132314	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. MAY 2, 2106	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. STEVEN LEMMA	
7724 SE ASPEN SUMMIT DRIVE SUITE 300, PORTLAND, OR 97266	 1
(Street Address of Principal Office)	15 No. 15
6. STEVEN LEMMA	
7724 SE ASPEN SUMMIT DRIVE SUITE 300, PORTLAND, OR 97266	(2)
(Mailing Address)	
7 Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name. John Dill	5. 2. 2.
Office Address: 4050 WESTGATE AVE # 108	<i>⊕</i> • • • • • • • • • • • • • • • • • • •
· ·	
WEST Palm BEAch Florida 33049 (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	
designated in this application. I hereby accept the appointment as registered agent and agree to act in this complywith the provisions of all statutes relative to the proper and complete performance of my duties, a	
accept the obligations of my position as registered agent.	
(Registered agent's signature)	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
STEVEN LEMMA, CEO	
GREG SMITH, CFO	
ONIX) SMITH, CIV	
	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cus	stady of records in the
jurisdiction under the law of which it is organized. (If the eerificate is in a foreign language, a translation of th	
of the translator must be submitted)	
Signature of an authorized person	
This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any fa	
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.15	5, F.S.
STEVEN LEMMA	
Typed or printed name of signee	

State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

Certificate of Existence 861N885J4

I, JEANNE P. ATKINS, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

CHYP, 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.

Jeanne & atkins

JEANNE P. ATKINS, SECRETARY OF STATE

5/23/2016