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SECRETARY OF STATE
SECRETARY OF STATE

FILED

TE HOW IS DO IT TO

K. SALY NOV 1 6 2016 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 352/1-39 / 8070056

AUTHORIZATION : The Man

COST LIMIT : \$ 125.00

ORDER DATE: November 1, 2016

ORDER TIME : 5:42 PM

ORDER NO. : 352139-001

CUSTOMER NO: 8070056

FOREIGN FILINGS

NAME: ASPERGER EXPERTS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	Asperger Expert

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:

Heather Patterson
Name of Person
Asperger Experts, LLC
Firm/Company
111 Queen Anne Ave N, Suite 510
Address
Seattle, WA 98109
City/State and Zip Code
heather@aspergerexperts.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather Patterson

_703

362-8212

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 \$\times \text{S130.00 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. F	∖spe¦r	ger Experts, LLC
		(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If na Liabi	ime unav lity Con	vailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited name," "L.L.C," or "LLC.")
		shington
آ. (Ju	risdictio	on under the law of which foreign limited liability (FEI number, if applicable)
Ç	ompany	is organized)
4		
		(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5.	111	Queen Anne Avenue N, Suite 510 ttle, WA, US, 98109 (Street Address of Principal Office)
		W 110 00100
-	Sea	ttle, WA, US, 98109
		(Street Address of Principal Office)
6		
-		(Mailing Address)
7	T	
/.	The n	ame, title or capacity and address of the person(s) who has/have authority to manage is/are:
	,	Daniel Raede 111 Queen Anne Avenue N, Suite 510, Seattle, WA, 98109, Member
		Heather Patterson 111, Queen Anne Avenue N, Suite 510, Seattle, WA, 98109, Manager
		ed is an original certificate of existence, no more than 90 days old, duly authenticated by the official
		stody of records in the jurisdiction under the law of which it is organized. (A photocopy is not
	-	e. If the certificate is in a foreign language, a translation of the certificate under oath of the translator ubmitted)
mu	si ue s	donniced)
		Hardley Vallago
		Signature of an authorized parson
		Signature of an authorized person e 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 a	ware 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.)
		Heather Patterson

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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.

	The name of the Limited Liability Company is: sperger Experts, LLC				
Ifı	navailable, the alternate to be used in the state of Florida is:				
2.	The name and the Florida street address of the registered agent and office are:				
	Corporation Service Company				
	(Name)				
	1201 Hays Street				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Tallahassee FL 32301 City/State/Zip				
	City/State/Zip				
lia reg sta acc	ving been named as registered agent and to accept service of process for the above stated limited vility company at the place designated in this certificate, I hereby accept the appointment as istered agent and agree to act in this capacity. I further agree to comply with the provisions of all the test relating to the proper and complete performance of my duties, and I am familiar with and ept the obligations of my position as registered agent as provided for in Chapter 605, Florida tutes.				
	Corporation Service Company Melissa Zender				
	By: Asst. Vice President				

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

The State of Washington

Secretary of State

1, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

ASPERGER EXPERTS, LLC

I FURTHER CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 10/6/2014.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest and penalties owed to this state and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Date: November 4, 2016

UBI: 603-442-133

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

• 1177 T

Kim Wyman, Secretary of State

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