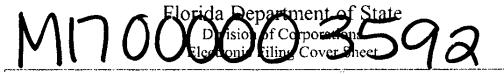
Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Fhone : (512)418-6949 Fax Number : (954)208-0845

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Email Address:

Foreign Limited Liability Company **Hawthorn Construction Group LLC**

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APR 27

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COVER LETTER

TO:	egistration Section ivision of Corporations		•	•			
SUBJE	Hawthorn Construction C	Group LLC					
		Name of i.	imited Liability (Company			
The encl Existence	ed "Application by Foreign I and check are submitted to n	Limited Liability Comparegister the above referen	iny for Authorize iced foreign limit	ition to Tra ted liability	nsact Business in Florida," company to transact busine	Certificate of iss in Florida	
Please re	rn all correspondence conce	rning this matter to the fi	ollowing:				
	Jill Schaeffer			•			
		Nai	ne of Person	 			
	Hawthorn Construction Group LLC						
Firm/Company							
	9310 NE Vancouver Mall Dr Suite 200						
			Address				
	Vancouver, WA 98662						
City/State and Zip Code-							
	Jill.Schaeffer@Hawth	omret.com					
	E-m	nail address: (to be used	for future annual	report noti	fication)		
For furth	information concerning this	matter, please call:					
	Il Schaeffer		503 at (586-730	98		
	Name of Con	itact Person	Area Code	Dayt	ime Telephone Number		
	AILING ADDRESS: ivision of Corporations registration Section O. Box 6327 illahassee, FL 32314	14 1946		Division of Registration But 2661 Execution But 266	ADDRESS: of Corporations on Section wilding entive Center Circle see, FL 32301		
			S155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy		

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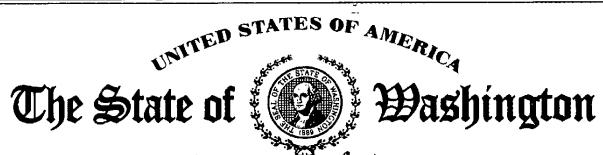
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 603.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of For	eign Limited Liability Company; mu		Liability Company," "L.L.C.," or "LLC	.")
If name unavailable, enter a	Itemate name adopted for the purpos "or "LLC."}	se of transacting bus	tiness in Florida. The alternate name mus	st include "Limited
Washington		3 82-12729.	30	
(Jurisdiction under the law company is organized)	of which foreign limited liability	***	(FEI number, if applicable)	
	(Date first transacted busine	ess in Florida, it not	or to registration)	
	(See sections 603,0904 & 605.	.0905, F.S. to deten	mine penalty liability)	
2260 McGilchrist St S	E	····		
Salem, OR 97302				
	(Street Address of	Principal Office)		17
5. 9310 NF. Vancouver M	all Dr Suite 200			32-
Vancouver, WA 9866	2			APR
	(Mailing /	Address)		27
7. Name and street addres	ss of Florida registered agent: (P.	.O. Box NOT acc	reptable)	
Name:	C T Corporation System		•	
	1200 South Pine Island Road			9 10
Office Address:				<u> </u>
	Plantation		Florida	
Registered agent's accep	(City)		(Zip code)	
o complywith the provish ecept the obligations of t	ons of all statutes relative to the my position as registered agent. By: CT Conversion Sy	proper and comp	Refery	
		who has/have aut	norty to manage brate.	
	Contractor, Inc Manager	who has/have aut	morey to manage is are.	
			morey to manage is at c.	<u> </u>
Colson & Colson General			norty to manage is are.	_
Colson & Colson General 2260 McGilchrist St SE Salem, OR 97302 Attached is a certificate	of existence, no more than 90 day of which it is organized. (If the celebrated)	ys old, duly auther ertificate is in a for	nticated by the official having custod reign language, a transtation of the co	ly of records in the ertificate under o
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Typed or printed name of signee

CONTRACT OF



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

OF

HAWTHORN CONSTRUCTION GROUP 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 4/20/2017.

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: April 26, 2017

UBI: 604-115-863

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

Kim Wyman, Secretary of State

