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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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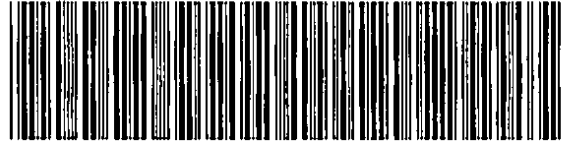
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(Document Number)

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APPROVED
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2021 DEC 16 PM 1:39

SECRETARY OF STATE
TALLAHASSEE, FL 09007

DEC 22 2021
K. Brumbley

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RIM Architects, 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:

Jane Sauer

Name of Person

Jane Sauer Law

Firm/Company

1409 G Street

Address

Anchorage, Alaska 99501

City/State and Zip Code

jane@janesauerlaw.com

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

For further information concerning this matter, please call:

Jane Sauer

907

222-0941

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. RIM Architects, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Alaska
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(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. 645 G Street, Suite 400
(Street Address of Principal Office)

6. 645 G Street, Suite 400
(Mailing Address)

Anchorage, Alaska 99501

Anchorage, Alaska 99501

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

Name: Registered Agents Inc.

Office Address: 7901 4th St. N. Ste 300

St. Petersburg, Florida 33702
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

Bill Hume
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

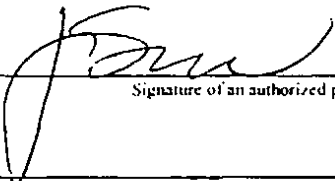
<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>David McVeigh</u>	<input checked="" type="checkbox"/> Manager	Name: <u>James Dougherty</u>
<input checked="" type="checkbox"/> Member	Address: <u>645 G Street, Suite 400</u>	<input checked="" type="checkbox"/> Member	Address: <u>645 G Street, Suite 400</u>
<input type="checkbox"/> Authorized	<u>Anchorage, Alaska 99501</u>	<input type="checkbox"/> Authorized	<u>Anchorage, Alaska 99501</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>
<input checked="" type="checkbox"/> Manager	Name: <u>Michelle Jones</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Brent Wiese</u>
<input checked="" type="checkbox"/> Member	Address: <u>639 Front Street, 2nd Floor</u>	<input checked="" type="checkbox"/> Member	Address: <u>316 Hernan Cortes, Suite 300</u>
<input type="checkbox"/> Authorized	<u>San Francisco, CA 94111</u>	<input type="checkbox"/> Authorized	<u>Hagatna, Guam 96910</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>
<input checked="" type="checkbox"/> Manager	Name: <u>Larry Cash</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Eddie Ebert</u>
<input checked="" type="checkbox"/> Member	Address: <u>645 G Street, Suite 400</u>	<input checked="" type="checkbox"/> Member	Address: <u>55 Merchant Street, Suite 1400</u>
<input type="checkbox"/> Authorized	<u>Anchorage, Alaska 99501</u>	<input type="checkbox"/> Authorized	<u>Honolulu, Hawaii 96813</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>

SEE ATTACHED LIST FOR ADDITIONAL MANAGERS AND MEMBERS OF RIM ARCHITECTS, LLC

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.



Signature of an authorized person

Jane Sauer

Typed or printed name of signer

**Continuation Page to Application by Foreign LLC for Authorization to Transact Business
in Florida**

Additional Managers and Members of RIM Architects, LLC

Michelle Klouda, Manager, Member
645 G Street, Suite 400
Anchorage, Alaska 99501

Dana Aiken, Manager, Member
191 East Main Street, Suite 2D
Tustin, California 92780

Matthew Inadomi, Manager, Member
639 Front Street, 2nd Floor
San Francisco, California 94111

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

RIM Architects, LLC

This entity was formed on December 31, 2008 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **October 1, 2021**.

A handwritten signature in cursive script, reading "Julie Anderson".

Julie Anderson
Commissioner