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2022 SEP 16 AHII: 18

COVER LETTER

TO: Registration Section

UBJECT:	PCHP Investments, LLC				
	Name of Limited Liability Company				
		Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Florida.			
ease return	all correspondence concerning this matter t	to the following:			
	PAMELA CHIRIBOGA				
		Name of Person			
	PCHP Investments, LLC				
		Firm/Company			
	1849 1st St				
		Address			
	Kirkland, WA 98033				
	C	City/State and Zip Code			
	aurora9632@outlook.com				
	E-mail address: (to be	e used for future annual report notification)			
r further is	nformation concerning this matter, please ca	H:			
PA	MELA CHIRIBOGA	425 8307767 at ()			
<u>-</u>	Name of Contact Person	Area Code Daytime Telephone Number			
Mailing Address: Registration Section		Street Address: Registration Section			
Division of Corporations		Division of Corporations			
P.C	D. Box 6327	The Centre of Tallahassee			
Tal	lahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	losed is a check for the following amount: ase make check payable to: FLORIDA DEF	PARTMENT OF STATE			
	\$125.00 Filing Fee \$130.00 Filing Fe Certificate of	ee & 🔲 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee, Certificate			

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. PCHP Investments, LLC (Name of Foreign I	C Limited Liability Company; must include "Limited	Liability Company," "L.L.C	"," or "LLC.")		_
PDAR Investments, LLC					
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rids. The alternate name must in	clude "Limited Liability (Company," "L,L,C," or	_ "LLC.")
SEATTLE, WA 2. (hurisdiction under the law of wh	nich föreign limited liability company is organized)	3.	(FEI number, if ap	oplicable)	_
4.	(Date first transacted business in Florida, if prior to n (See sections 605,0904 & 605,0905, F.S. to determin	rgistration.)			
1849 1st St, Kirkland, V 5. (Street Address of Principal Office)		1849 1st St, Kir	rkland, WA 98033		_
					-
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)		KOSSIN TUMAS	- "انت ز
Name:	Pamela Chir	iboga ave., unit	21.0	6 AHII Yufish Salasi	
Office Address:	Mian: Beach	,	· Ph7 3214	* 18	
	17110M, Dealer	, Florida	(Zip code)	U.	

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.

(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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: PAMELA CHIRIBOGA ■ Manager □ Manager Address: 1849 1st St Address: ■ Member □Member Kirkland, WA 98033 Authorized □ Authorized Person Person Other □Other □Other □Other □Manager Name: □ Manager Name: ☐ Member Address: ☐Member Address: □ Authorized □ Authorized Person Person □Other____ Other____ □Other □Other □Manager Name: □Manager Name: _____ □Member Address: Address: ☐ Member □ Authorized □ Authorized Person Person □Other_ □Other □Other □Other_____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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

Typed or printed name of signee

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

PAMELA CHIRIBOGA

- MINING

The State of Washington

Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

ate of Washington, County of CERTIFICATE OF EXISTENCE

certify that this is a true and correct

dopylof a document in the possession of Pamela Alexandra Chiribaga

OF

Dated: <u>AN AuditSt 3177</u> Notary Public - State of Washington

PCHP INVESTMENTS LLC

I 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 11/25/2015.

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 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.

Issued Date:

08/03/2022

UBI Number:

603 555 899



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

Steve R. Hobbs, Secretary of State

Date Issued: 08/03/2022

CYNTHIA LI Notary Public State of Washington Commission # 207980

My Commit Expression 27, 202