# M23000003593

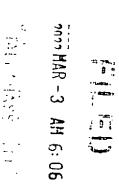
(Re	equestor's Name)	
(Ac	ldress)	
(Ar	ldress)	
(, , ,	141030)	
<del></del>		
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
		-
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	· <del></del>
Certified Copies	Certificate:	s of Status
,		
<u>-</u>	<del></del>	
Special Instructions to	Filing Officer:	





300403182603

03/03/23--01013--010 \*\*125.00



### **COVER LETTER**

TO:

Registration Section

RIFCT.	DeepThink, LLC	
1301,01.	Nam	e of Limited Liability Company
e enclosed istence, an	1 "Application by Foreign Limited Liability on check are submitted to register the above	Company for Authorization to Transact Business in Florida." Certifica referenced foreign limited liability company to transact business in Florida.
ase return	all correspondence concerning this matter to	o the following:
	Richard Aday, Manager	
		Name of Person
	DeepThink, LLC	
		Firm/Company
	1700 7th Ave, Ste 116 PMB 173	
		Address
	Seattle, Washington 98101	
	C	City/State and Zip Code
	payroll@thinkreservations.com	
	E-mail address: (to be	e used for future annual report notification)
r further in	nformation concerning this matter, please ca	11:
Ste	phanie Gero Dahlstrom	206 682-7090
	Name of Contact Person	at () Area Code Daytime Telephone Number
	iling Address:	Street Address: Registration Section
	gistration Section vision of Corporations	Division of Corporations
	D. Box 6327	The Centre of Tallahassee
	Ilahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	closed is a check for the following amount:	
	ase make check payable to: FLORIDA DEF \$125.00 Filing Fee	ee & 💢 \$155.00 Filing Fee & 💢 \$160.00 Filing Fee, Certificat

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTEN THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in Flo				
Washington	hich foreign limited liability company is organized)	3. 45-5442530 (FEI number, (Fapplicable)			
(Jurisdiction under the law of w	nen toreign ilmited liability company is organized)		(113 numoci,	п априсане)	
N/A					
· · · · · · · · · · · · · · · · · · ·	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 603 0905; F.S. to determin	registration ) ne penalty liability)	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
5409 Langley R	oad	1700	) 7th Avenue Suite	e 116. PMB	173
et Address of Principal Office)		6	7th Avenue, Suite		
Langley, WA 98	8260	Sea	ttle, WA 98101		
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
Name and street addres	s of Florida registered agent: (P.O. Box	NOT accepta	ıble)		202
Name and street addres	s of Florida registered agent: (P.O. Box	NOT accepta	ble)	72. 71.	2022 MA
	s of Florida registered agent: (P.O. Box  Northwest Registered Ag		ble)	EV CH	2022 MAR -
Name and street addres  Name:	Northwest Registered Ag		ible)	FAR COMASS	င်
			ıble)	TAU AHASUF.	-3 AH
Name:	Northwest Registered Ag 7901 4th St N STE 300			TALL CHASSES . See	-3 AH 6:
Name:	Northwest Registered Ag 7901 4th St N STE 300 St. Petersburg		. Florida <u>33702</u>	₹,	-3 AH
Name:	Northwest Registered Ag 7901 4th St N STE 300		. Florida 33702	₹,	-3 AH 6:
Name: Office Address: gistered agent's accep	Northwest Registered Ag 7901 4th St N STE 300 St. Petersburg	gent LLC	. Florida 33702 (Zip code)	<u>-</u>	-3 AM 6: 06
Name: Office Address: gistered agent's acceptiving been named as resignated in this applicate	Northwest Registered Ag 7901 4th St N STE 300 St. Petersburg	gent LLC	. Florida 33702 (Zip code)  above stated limited lia	bility company	-3 AH 6: 06 at the

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]: Name and Address: Title or Capacity: Name and Address: **Title or Capacity:** Richard Aday Name: Alfred Aday Manager • Manager 5409 Langley Road Address: \_\_\_ 5409 Langley Road Address: \_ □ Member □ Member Langley, WA 98260 Langley, WA 98260 □ Authorized □ Authorized Person Person Other\_\_\_\_ \_\_\_\_\_ □Other\_\_\_\_\_\_\_\_ Other Other\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager Name: □Member Address: \_\_\_\_\_ □Member Address: ☐ Authorized □ Authorized Person Person ☐ Other\_\_\_\_\_ □Other \_\_\_ □Other\_\_\_\_\_ □Other Name: \_\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager Address: □Member Address: \_\_\_\_\_ □ 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 submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Richard Aday Signature of an authorized person Richard Aday, Manager

Typed or printed name of signee



## Secretary of State

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

## CERTIFICATE OF EXISTENCE

OF

#### DEEPTHINK, 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 06/06/2012.

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: 02/22/2023 UBI Number: 603 212 740 - 772



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

Ster R Hobbie

Steve R. Hobbs, Secretary of State

Date Issued: 02-22-2023