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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HURTIGRUTEN INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

STEVEN FRANZ
Name of Person
HURTIGRUTEN INC.
Firm/Company
320 120th AVE NE #100
Address
BELLEVUE, WA 98005
City/State and Zip code
steven.franz@hurtigruten.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN FRANZ at (425) 450-7240
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. HURTIGRUTEN INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW YORK 3. 13-0460204 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/31/1938 5. (Date of incorporation) (Date of duration, if other than perpetual)

6. 3/7/16 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 320 120th AVE NE #100, BELLEVUE, WA 98005 (Principal office address)

- SAME - (Current mailing address, if different)

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

Name: HUBCO Registered Agent Services, Inc.

Office Address: 155 Office Plaza Dr., 1st Fl. Tallahassee, Florida 32301 (City) (Zip code)

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9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Bruce B. Hubbard (Registered agent's signature) Bruce B. Hubbard, President

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: DANIEL : SKJELDAM

Address: 320 120th AVE NE # 100
BELLEVUE, WA 98005

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: KIM WEGENER

Address: 25 OSBORNE ROAD, GARDEN CITY, NY 11530

Treasurer: STEVEN FRANZ

Address: 320 120th AVE NE #100, BELLEVUE, WA 98005

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. STEVEN FRANZ, TREASURER

(Typed or printed name and capacity of person signing application)

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of HURTIGRUTEN INC. was filed on 12/31/1938, under the name of B. & N. LINE, INC., fixing the duration as perpetual, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A certificate changing name to BERGEN STEAMSHIP CO. INC. was filed on 11/18/1946.

A Certificate of Amendment was filed on 03/21/1950.

A certificate changing name to BERGEN LINE, INC. was filed on 07/19/1972.

A Biennial Statement was filed 06/19/1995.

A Biennial Statement was filed 12/30/1996.

A certificate changing name to NORWEGIAN COASTAL VOYAGE INC. was filed on 06/03/1999.

A Biennial Statement was filed 11/19/1999.

A Biennial Statement was filed 01/02/2001.

A Biennial Statement was filed 11/22/2002.

A Biennial Statement was filed 02/02/2005.

A certificate changing name to HURTIGRUTEN INC. was filed on 09/04/2007.

A Biennial Statement was filed 09/12/2007.

A Biennial Statement was filed 06/09/2011.

A Biennial Statement was filed 04/01/2013.

A Certificate of Amendment was filed on 10/08/2013.

A Biennial Statement was filed 02/12/2015.

I further certify that no other documents have been filed by such corporation.



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 04th day of March
two thousand and sixteen.