

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, **SAM REED**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF REGISTRATION

to

ASM LLC DBA ALL SERVICE MOVING LLC

a/an OR Limited Liability Company. Charter documents are effective on the date indicated below.

Date: 2/23/2012

UBI Number: 603-093-984

STATE OF WASH
UTIL. AND TRAF.
COMMISSION

2012 AUG -9 PM 2:48

RECEIVED
PROPERTY MANAGEMENT



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

Sam Reed, Secretary of State

02/23/12 2128935-002
\$7.10 R #731142_33004148871
tid: 2267524

Page 1 of 2



STATE OF WASHINGTON
SECRETARY OF STATE

Foreign Limited Liability Company
See attached detailed instructions

- Filing Fee \$180.00
- Filing Fee with Expedited Service \$230.00

This Box For Office Use Only

02/23/12 2128932-
001
\$180.00 K #1474
tid: 2267524

FILED
SECRETARY OF STATE
SAM REED
FEBRUARY 23, 2012
STATE OF WASHINGTON

UBI Number: 603093984

FOREIGN LIMITED LIABILITY COMPANY REGISTRATION

Chapter 25.15 RCW

SECTION 1

NAME OF LIMITED LIABILITY COMPANY: (As recorded in the state/country of formation)

ASM LLC

NAME TO BE USED IN WASHINGTON STATE:

(Must contain one of the following designations: Limited Liability Company, Limited Liability Co or one of these abbreviations: L.L.C. or LLC. If the designation is omitted, it will default to LLC when processed)

All Service Moving LLC

SECTION 2

STATE OR COUNTRY WHERE ORIGINALLY FORMED: Oregon

DATE OF ORIGINAL FORMATION: 1/1/2009

(Certificate of Existence or similar import (not more than 60 days old) from original state must be attached)

SECTION 3

ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS:

Street Address 5203 SE Johnson Creek ^{DIVD} City Portland State/Country OR Zip 97222

PO Box _____ City _____ State/Country _____ Zip _____

SECTION 4

EFFECTIVE DATE OF REGISTRATION: (Please check one of the following)

- Upon filing by the Secretary of State
- Specific Date: _____ (Specified effective date must be within 90 days AFTER the Certificate of Registration has been filed by the Office of the Secretary of State)

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

ASM LLC

was

organized

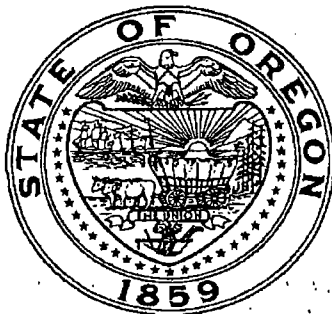
under the Oregon

Limited Liability Company Act

on

January 1, 2009

and is active on the records of the Corporation Division as of
the date of this certificate.



In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.

A handwritten signature in black ink, appearing to read "Kate Brown".

KATE BROWN, Secretary of State

February 13, 2012

SECTION 5

TENURE: (Please check one of the following and indicate the date if applicable)

- Perpetual existence
- Specific term of existence _____ (Number of years or date of termination)

SECTION 6

DATE THE LLC BEGAN DOING BUSINESS IN WASHINGTON STATE: 1/1/12

SECTION 7

NATURE OF BUSINESS IN WASHINGTON STATE: Moving

SECTION 8

NAME AND ADDRESS OF THE WASHINGTON STATE REGISTERED AGENT:

Name: National Registered Agents, Inc.

Physical Location Address (required):

1780 Barnes Blvd. SW.

City Tumwater WA Zip Code 98512-0410

Mailing or Postal Address (optional):

City _____ WA Zip Code _____

CONSENT TO SERVE AS REGISTERED AGENT:

I consent to serve as Registered Agent in the State of Washington for the above named Limited Liability Company. I understand it will be my responsibility to accept Service of Process on behalf of the Limited Liability Company; to forward mail to the Limited Liability Company; and to immediately notify the Office of the Secretary of State if I resign or change the Registered Office Address.

x Cheryl Conkling Cheryl Conkling - Asst. Secretary 2-23-12
Signature of Registered Agent Printed Name Date

SECTION 9

NAME, ADDRESS AND SIGNATURE OF MEMBER OR MANAGER:

(If necessary, attach additional names, addresses and signatures)

Name: Jeffrey Grabeel

Address: 6312 SE 14th Ave City Portland State OR Zip Code 97202

This document is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.

x Jeffrey Grabeel Jeffrey Grabeel CEO 1/1/2012 503 810 2770
Signature Printed Name/Title Date Phone

Notice: The Washington Secretary of State will be appointed the agent of the foreign limited liability company for service of process under the circumstances set forth in RCW 25.15.355(2)