



Washington

Secretary of State

SAM REED

16020171

CORPORATIONS DIVISION
James M. Dolliver Building
801 Capitol Way South • PO Box 40234
Olympia, WA 98504-0234
Tel: 360.725.0377
Fax: 360.664.8781
www.secstate.wa.gov/corps

Congratulations:

You have completed the initial filing to create a new business entity. **The next step in opening your new business is to complete a Master Business Application.** You may have completed this step already. The Master Business Application can be completed online or downloaded at: <http://www.dol.wa.gov/business/file.html>

If you have any questions about the master application, or would like a master application package mailed to you, please call the Department of Licensing at 360-664-1400.



FIN: 01-0966340
2 WKS NOTICE

IMPORTANT

You have completed the initial filing to create a new entity. To keep your filing status active and avoid administrative dissolution, you must:

- 1. **File an Annual Report** and pay the annual license fee each year before the anniversary of the filing date for the entity. A notice to file your annual report will be sent to your registered agent. It is the corporation or LLC's responsibility to file the report even if no notice is received.

- 2. **Maintain a Registered Agent** and registered office in this state. You must notify the Corporations Division if there are any changes in your registered agent, agent's address, or registered office address. Failure to notify the Corporations Division of changes will result in misrouted mail, and possibly administrative dissolution.

If you have questions about report and registered agent requirements, please contact the Corporations Division at 360-725-0377 or visit our website at: <http://www.secstate.wa.gov/corps>

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 INCORPORATION

to

**WASHINGTON ASSOCIATION FOR FLOODPLAIN
MANAGEMENT**

a/an WA Non-Profit Corporation. Charter documents are effective on the date indicated below.

Date: 4/21/2010

UBI Number: 603-015-094

APPID: 1712624



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

A handwritten signature in blue ink that reads "Sam Reed".

Sam Reed, Secretary of State



STATE OF WASHINGTON
SECRETARY OF STATE



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This Box For Office Use Only

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\$30.00 K #8601
id: 1882192

FILED
SECRETARY OF STATE
SAM REED

04/21/10

STATE OF WASHINGTON

Washington Nonprofit Corporation

See attached detailed instructions

Filing Fee \$30.00

Filing Fee with Expedited Service \$50.00

UBI Number: 603 015 094

ARTICLES OF INCORPORATION

Chapter 24.03 RCW

ARTICLE 1

NAME OF CORPORATION:

WASHINGTON ASSOCIATION FOR FLOODPLAIN MANAGEMENT

(MAY NOT contain any of the following designations or abbreviations of: Corporation, Company, Incorporated, Limited, Limited Partnership, Limited Liability Company, or Limited Liability Partnership)

ARTICLE 2

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

Upon filing by the Secretary of State

Specific Date: _____ (Specified effective date must be within 30 days AFTER the Articles of Incorporation have been filed by the Office of the Secretary of State)

ARTICLE 3

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)

ARTICLE 4

PURPOSE FOR WHICH THE NONPROFIT IS ORGANIZED: (if necessary, attach additional information)

SEE ATTACHED

ARTICLE 5

IN THE EVENT OF A VOLUNTARY DISSOLUTION, THE NET ASSETS WILL BE DISTRIBUTED AS

FOLLOWS: (if necessary, attach additional information) SEE ATTACHED

ARTICLE 6

NAME AND ADDRESS OF EACH INITIAL DIRECTOR: (If necessary, attach additional names and addresses)

Name: HAROLD SMELT, PE, SURFACE WATER MANAGER
Address: 2702 SOUTH 42ND ST, SUITE 201
City TACOMA State WA Zip Code 98409-7322

ARTICLE 7

NAME AND ADDRESS OF THE WASHINGTON STATE REGISTERED AGENT:

Name: HAROLD SMELT, PE, SURFACE WATER MANAGER
Physical Location Address (required): 2702 SOUTH 42ND ST, SUITE 201
City TACOMA WA Zip Code 98409-7322

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 corporation. I understand it will be my responsibility to accept Service of Process on behalf of the corporation; to forward mail to the corporation; and to immediately notify the Office of the Secretary of State if I resign or change the Registered Office Address.

X [Signature] HAROLD SMELT 4/18/2010
Signature of Registered Agent Printed Name Date

ARTICLE 8

NAME, ADDRESS AND SIGNATURE OF EACH INCORPORATOR:

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

Name: HAROLD SMELT, PE, SURFACE WATER MANAGER
Address: 2702 SOUTH 42ND ST, SUITE 201
City TACOMA State WA Zip Code 98409-7322

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

X [Signature] HAROLD SMELT 4/18/2010 (253) 798-2952
Signature of Incorporator Printed Name/Title Date Phone

Important Note: If your nonprofit organization is currently fundraising, or plans to fundraise from the public, it may also be required to register with the Charities Program of the Secretary of State. Registration with the Charities Program is separate from and in addition to filings required under corporate law. Please visit the Charities Program website at www.secstate.wa.gov/charities/ to review the registration requirements and forms for Charitable Organizations.

ARTICLES OF INCORPORATION

Chapter 24.03 RCW

ARTICLE 1

NAME OF CORPORATION: Washington Association for Floodplain Management

ARTICLE 2

EFFECTIVE DATE OF INCORPORATION: (Upon filing by the Secretary of State)

ARTICLE 3

TENURE: This nonprofit corporation shall have perpetual existence.

ARTICLE 4

PURPOSE FOR WHICH THE NONPROFIT IS ORGANIZED: To promote the common interest in sound floodplain management, to enhance cooperation and to exchange information among various related private organizations, individuals and local, state and federal agencies, to encourage appropriate and effective approaches to managing the state's floodplains, and to engage the public in floodplain management issues.

ARTICLE 5

IN THE EVENT OF A VOLUNTARY DISSOLUTION, THE NET ASSETS WILL BE DISTRIBUTED AS

FOLLOWS: It is the intent of the Corporation to permanently dedicate its assets to exempt purposes consistent with the provisions of Section 501(c) (3) of the Internal Revenue Code.

In the event of voluntary dissolution, of the Washington Association for Floodplain Management, any education materials assets will be deposited with a State or local public library, or exempt education institution. All and any other assets of the nonprofit corporation will be donated to other nonprofit organizations whose purpose is to support floodplain management.

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or any corresponding section any future federal tax code, or shall be distributed to State or local government public libraries or exempt education institutions as indicated above.

ARTICLE 6

NAME AND ADDRESS OF EACH INITIAL DIRECTOR: Harold Smelt, P.E., Pierce County Surface Water Manager, 2702 South 42nd Street, Suite 201, Tacoma, WA. 98409-7322

