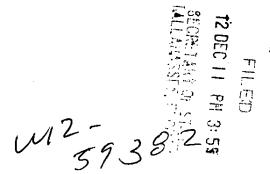
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
ertified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
	Office Use Or	ıly



500239346285

11/28/12--01014--002 **70.00



T. Buren DEE 1 2 2012

COVER LETTER

	Filing Section of Con	etion rporations				
SUBJECT:	NASHBA	AR DIRECT, INC.				
		Name	of corpora	tion	- must include suffix	
Dear Sir or M	ladam:					
"Certificate o	f Existenc		e of Good	Stan	ding" and check are sub	ct Business in Florida," omitted to register the
Please return	all corresp	ondence concerr	ing this ma	atter	to the following:	
GWEN JOHN	SON					
			Name	of F	Person	
NASHBAR D	IRECT, IN	C.				
			Firm/C	Comp	pany	
I PERFORMA	NCE WA	Y				
		<u> </u>	A	ddre	SS	
CHAPEL HIL	L, NC 275	14				
***************************************			City/Stat	te an	d Zip code	
gwenjohnson@	gperformar	ceinc.com				
		E-mail addres	s: (to be us	ed fo	or future annual report i	notification)
For further in	formation	concerning this r	natter, plea	se ca	all:	
GWEN JOHN	SON		919 at (913-3626	
Name	e of Perso	n		ea C	ode & Daytime Teleph	one Number
l						
New I Divisi Clifto 2661	Filing Section of Cor on Building	porations g Center Circle	S:		MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations
Enclosed is a	check for	the following am	ount:			,
⊠ \$70,00 Fil	ing Fee	S78.75 Filin Certificate			\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



November 28, 2012

GWEN JOHNSON 1 PERFORMANCE WAY CHAPEL HILL, NC 27514

SUBJECT: NASHBAR DIRECT, INC.

Ref. Number: W12000059382

We have received your document for NASHBAR DIRECT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please have an individual sign for the business listed as the Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 712A00028360

Tim Burch Regulatory Specialist II

www.sunbiz.org

Division of Comparations DO DOY 6997 Tallahassas Florida 2021

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIE NASHBAR DIRECT, INC.					
1.	orporation; must include "INCORPORATE	<u> </u>	"COMBANY" "COPPORATION"	1	
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")	SD,	COMPANT, CORPORATION,	i i i i i i i i i i i i i i i i i i i	٦
				1	7
NASHBAR DIF	RECT, INC OF NORTH CAROLINA			!!	<i>ب</i> ع
(If name unavaila	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business	in Florid	a) 🐸
2. NORTH CARO	LINA	3.	562186744		
	under the law of which it is incorporated)		(FEI number, if applicable)		
4. FEBRUARY 10	0, 2000	5.	PERPETUAL		
	of incorporation)	٠.	(Duration: Year corp. will cease to exist or "	perpetual	")
6. N/A					
			n Florida, if prior to registration)		
I DEDECORATE	•	17.1:	502, F.S., to determine penalty liability)		
7	CE WAY CHAPEL HILL, NC 27514				
1 DEDECTOMAN	(Principal office ICE WAY CHAPEL HILL, NC 27514	add	ress)		
TERFORMAN	(Current mailing	odd.			
	(Current maning	auu	ica)		
8. CATALOG/IN	TERNET SALES OF BICYCLES AND R	ELA	ATED EQUIPMENT AND ACCESSORIES		
	s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)		
9 Name and stree	et address of Florida registered agent:	P (O Box NOT acceptable)		
	NRAI Services, Inc.	ζ	5. 50K <u>1.01</u> uddop.uo.0)		
Name:	THE SOLVICES, INC.				
Office Address:	515 East Park Avenue				
	Tallahassee		. Florida 32301		
	(City)		(Zip code)		

10. 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.

By Miller Holde, HSA. St. A.

11. 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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: GARRY SNOOK 1 PERFORMANCE WAY Address: CHAPEL HILL, NC 27514 Vice Chairman: ___ Address: _ Director: ري سر Address: ___ Address: **B. OFFICERS DAVID PRUITT** President: 1 PERFORMANCE WAY Address: _ CHAPEL HILL, NC 27514 KENNETH R. TAYLOR, JR. Vice President: 1 PERFORMANCE WAY Address: CHAPEL HILL, NC 27514 Secretary: __ Address: _ Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 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.

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

KENNETH R. TAYLOR, JR.



NORTH CAROLINA Department of the Secretary of State

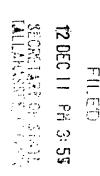
CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

NASHBAR DIRECT, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 10th day of February, 2000, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.







IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 15th day of November, 2012.

Elaine I. Marshall

Secretary of State