M10000001843

900297662029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _______ Certificates of Status _______

Special Instructions to Filing Officer:

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FILED
2017 APR -7 AM 7:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
APR 11 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 572945 5045683

AUTHORIZATION :

COST LIMIT : $ 25.00

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ORDER DATE : March 28, 2017

ORDER TIME : 1:02 PM

ORDER NO. : 572945-015

CUSTOMER NO: 5045683

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FOREIGN FILINGS

NAME: SONY INTERACTIVE ENTERTAINMENT
AMERICA LLC

______ CORPORATE
______ LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

________ CERTIFIED COPY
XX PLAIN STAMPED COPY
________ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: ________________________

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 10, 2017

RESUBMIT
Please give original submission date as file date.

CSC
MELISSA ZENDER
,

SUBJECT: SONY INTERACTIVE ENTERTAINMENT AMERICA LLC
Ref. Number: M10000001843

We have received your document for SONY INTERACTIVE ENTERTAINMENT AMERICA LLC and your check(s) totaling $. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please submit a "CERTIFICATE OF STATUS" from the California Secretary of State along with the conversion amendment.

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 317A00006813

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TALLAHASSEE, FLORIDA

# COVER LETTER

**TO:** Registration Section
Division of Corporations

**SUBJECT:** Sony Interactive Entertainment America LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cynthia L. Woodman, Sr. Paralegal
Name of Person

Sony Interactive Entertainment America LLC
Firm/Company

2207 Bridgepointe Parkway
Address

San Mateo, CA 94404
City/State and Zip Code

siecorpnotices@sony.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia L. Woodman at (650) 655-5902
Name of Person — Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**MAILING ADDRESS:**
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- ☐ $25 Filing Fee
- ☐ $30 Filing Fee & Certificate of Status
- ☐ $55 Filing Fee & Certified Copy
- ☐ $60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Sony Interactive Entertainment America LLC

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Enter new principal office address, if applicable: ____________________

***(Principal office address***
***MUST BE A STREET ADDRESS)***

Enter new mailing address, if applicable: ____________________
***(Mailing address***
***MAY BE A POST OFFICE BOX)***

2. The Florida document number of this limited liability company is: M10000001843

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: April 23, 2010

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: ____________________
(must contain "Limited Liability Company, " "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: ____________________

New Registered Office Address: ____________________
*Enter Florida Street Address*

____________________, **Florida** ____________
*City* *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:
*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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

____________________
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

California

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TALLAHASSEE, FLORIDA

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

| Title/ Capacity | Name | Address | Type of Action |
|---|---|---|---|
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Add |
| | | | ☐ Remove |

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

R. R. Russell

Signature of the authorized representative

Riley R. Russell, Secretary

Typed or printed name of signee

**Filing Fee: $25.00**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# State of California
## Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: SONY INTERACTIVE ENTERTAINMENT AMERICA LLC

| | |
|---|---|
| FILE NUMBER: | 201701310323 |
| FORMATION DATE: | 01/12/2017 |
| TYPE: | DOMESTIC LIMITED LIABILITY COMPANY |
| JURISDICTION: | CALIFORNIA |
| STATUS: | ACTIVE (GOOD STANDING) |

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.

THE GREAT SEAL OF THE STATE OF CALIFORNIA
EUREKA

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 28, 2017.

**ALEX PADILLA**
**Secretary of State**

RYM

LLC-1A

File # 201701310323

2010098 10380

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Secretary of State
State of California

JAN 12 2017

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# State of California
## Secretary of State

### Limited Liability Company
### Articles of Organization - Conversion

**IMPORTANT — Read all instructions before completing this form.**

**Converted Entity Information**

1. Name of Limited Liability Company (The name must include the words Limited Liability Company or the abbreviations LLC or L.L.C. The words Limited and Company may be abbreviated to Ltd. and Co., respectively.)

   Sony Interactive Entertainment America LLC

2. The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

3. The limited liability company will be managed by (check only one):

   ☑ One Manager ☐ More Than One Manager ☐ All Limited Liability Company Member(s)

4. Initial Street Address of Limited Liability Company's Designated Office in CA — City — State — Zip Code

   2207 Bridgepointe Parkway — San Mateo — CA — 94404

5. Initial Mailing Address of Limited Liability Company, if different from Item 4 — City — State — Zip Code

6. Initial Agent for Service of Process: Item 6a: List the name of an individual or a corporation registered in CA under California Corporations Code section 1505 that agrees to be your agent for service of process. You may not list the converted entity as the agent. Item 6b: If the agent is an individual, list the agent's CA business or residential street address. Item 6c: If the agent is an individual and the converting entity is a CA corporation, limited partnership or general partnership, list the agent's mailing address. Do not list an address if the agent is a CA registered corporate agent as the address for service of process is already on file.

   a. Name of Agent For Service of Process

   *Corporation Service Company Which Will Do Business In California As CSC-Lawyers Incorporating Service*

   b. If an individual, Street Address of Agent for Service of Process - *Do not list a P.O. Box* — City — State CA — Zip Code

   c. If an individual, Mailing Address of Agent for Service of Process — City — State — Zip Code

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**Converting Entity Information**

7. Name of Converting Entity

   Sony Interactive Entertainment America LLC

| 8. Form of Entity | 9. Jurisdiction | 10. CA Secretary of State File Number, if any |
|---|---|---|
| LLC | Delaware | 201009810380 |

11. The principal terms of the plan of conversion were approved by a vote of the number of interests or shares of each class that equaled or exceeded the vote required. If a vote was required, the following was required for each class:

| The class and number of outstanding interests entitled to vote. | AND | The percentage vote required of each class. |
|---|---|---|
| sole member | | sole member |

**Additional Information**

12. Additional information set forth on the attached pages, if any, is incorporated herein by this reference and made part of this certificate.

13. I certify under penalty of perjury that the contents of this document are true. I declare I am the person who executed this instrument, which execution is my act and deed.

[signature] — *Jin Hagimoto, CFO & Treasurer*

Signature of Authorized Person — Type or Print Name and Title of Authorized Person

Signature of Authorized Person — Type or Print Name and Title of Authorized Person