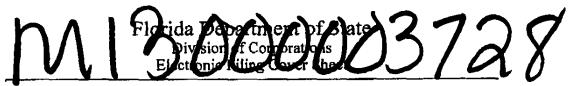
Division of Corporations

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From

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

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Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for theure annual report mailings. Enter only one email address please.

Rmail Address:

#### Foreign Limited Liability Company PALOGIX INTERNATIONAL USA, LLC

Certificate of Status	0
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D. BRUCE

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### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 60850B, FLORIDA STATUTEN THE FULLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Palogix International USA, LLC (Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or	r-LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attack consent of the managers or managing members adopting the alternate name. The alternate name must include "Company," "L.L.C," "LLC.")	h a copy of t 'Limited Lis	he written ibility
<sub>2</sub> Delaware		
(Jurisdiction under the law of which foreign limited flability (FEI number, if applicable) company is organized)		
4. June 23, 2009 <sub>5.</sub> perpetual		
(Date of Organization) (Duration: Year limited liability company exist or "perpetual")	y will cease	to
6		<del></del>
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 11601 Wilshire Blvd, Ste 1925	35:00	
Los Angeles, CA 90025	0 K	
(Street Address of Principal Office)	255	— 7°
8. If limited liability company is a manager-managed company, check here	RY OF	3 F
9. The name and usual business addresses of the managing members or managers are as fol Robert Liebesman, Jeffrey Liebesman, Jonathan Liebesman		ưα œ 🚛
Hertzberg and Matthew Winnick, 11601 Wilshire Blvd, Ste 19	3-	
Los Angeles, CA 90025		_
10. Attached is an original certificate of existence, no more than 90 days old, duty authenticated by the official have the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fortunalistic of the certificate under eath of the translation must be submitted.)	ing custody	ofrecords in 12.0
11. Nature of business or purposes to be conducted or promoted in Florida:		·
Ahr). / N		
Signature of a member or an authorized representative of a member.  (In accordance with section 608.40%(3), F.S., the execution of this document constitutes an affirmation to	under the	
penalties of perjury that the facts stated herein are true. (am aware that any false information submidocument to the Department of State constitutes a third degree felony as provided for in \$.81	nitted in a	
Robert Liebesman		

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
CT Corporation System (Name)	
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)  Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Plantation FL 33324 EDF STARY OF STARY	
Having been named as registered agent and to accept service of process for the above stated finite of liability company at the place designated in this certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position his registered agent as provided for in Chapter 608, Florida Statutes.	
(Signature)	
S 100.00 Filing Fee for Application S 25.00 Designation of Registered Agent S 30.00 Certified Copy (optional)	

S 5.00 Certificate of Status (optional)

# Delaware

PAGE

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PALOGIX INTERNATIONAL USA, LLC" IS
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN
GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF
THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JUNE, A.D. 2013.

AND I DO BEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4701761 8300

130771471

You may verify this certificate online at corp. deleware.gov/authvor.shtml

Jeffrey W. Bullock, Secretary of State

DATE: 06-13-13