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| Address  |   |
| City/State/Zip Phone #   | MAR -8 PH<br>AHASSEE, FIL   |
| CORPORATION NAME(S) & DOCU   | 2   |
| 1(Corporation Name)  | (Document #)  |
| (Corporation Name)   | 70-00   |
| 4(Corporation Name)  | (Document #)  |
| ☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait                          | Certified Copy  Photocopy  Certificate of Status  |
| NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other | AMENDMENTS  100050740512 -03/08/0201072013 *****332.50 *******70.00  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger |
| OTHER FILINGS  Annual Report Fictitious Name                             | REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other   |

CR2E031(7/97)

Examiner's Initials

| TRANSMITTAL LETTER   |
|--|
| To: Registration Section Division of Corporations  |
| SUBJECT: LS Noldings Limited Inc.  (Name of corporation - must include suffix)   |
| Dear Sir or Madam:   |
| The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. |
| Please return all correspondence concerning this matter to the following:  |
| Name of Person)  |
| (Name of Person)  LS Nolding Cimited Inc.  (Firm/Company)  |
| (Firm/Company)   |
| 543/ ROBERT SCOTT DRIVE WORTH (Address)  |
| <u>JACKSONUTCLE</u> , FL 32207-5966<br>(City/State/Zip)  |
| Should you need to call someone concerning this matter, please call:   |
| (Name of Person) at (904) 463-1292  (Area Code & Daytime Telephone Number)   |
| STREET ADDRESS: MAILING ADDRESS:   |
| Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314   |
| Enclosed is a check for the following amount:  |
| \$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & Branch \\$78.75 Filing Fee & Status Certified Copy Certificate of Status & Certified Copy   |

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT, BUSINESS IN THE STATE OF FLORIDA.  |
|---|
| 1. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" of words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a   |
| natural person or partnership if not so contained in the name at present.)  2. De aware  (State or country under the law of which it is incorporated)  3. 03-0389540  (FEI number, if applicable)  4. February  (Date of incorporation)  (Duration: Year corp. will cease to exist or "perpetual")  6. One of incorporation has not transacted business in Florida, insert "upon qualification.")  (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)  7. a. 543   lossest Sections for address)                                 |
| 8. INVESTMENTS and any other reason then to related  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  |
| 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: losert lee Scott, II  Office Address: 543 losest Scott Detue Month  TACKSINVILLE, FL Florida 89207-5460 (Zip code)  (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.  (Registered agent's signature) |

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.

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| coc Chairman:  ddress:  ddress:  ddress:  DFFICERS  esident:  Lobert Let Scott, II  ddress:  JACKSONWILLE, FL RODO 7-59 GO  coc President:  ddress:  ddress:  DTE: If necessary you may attach an addy shum to the application listing additional officers and/or directors.  Later Let Later Let Lobert Let Scott, II  ddress:  DTE: If necessary you may attach an addy shum to the application listing additional officers and/or directors.  | ddress:    | 5431 KOBER ( SCOTT DEIVE NORTH   |
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(Typed or printed name and capacity of person signing application)

PAGE 1

## Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RLS HOLDINGS LIMITED, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF MARCH, A.D. 2002.



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Farriet Smith Windson

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 1658093

DATE: 03-11-02