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Hodges, Valerie L.

Foley & Lardner LLP

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# FO9000002202

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## FOREIGN PROFIT/NONPROFIT CORPORATION

BROTHERS PERFORMANCE WAREHOUSE, INC.

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June 2, 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FOLEY & LARDNER

SUBJECT: BROTHERS PERFORMANCE WAREHOUSE, INC.  
REF: W09000025702

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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# 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. BROTHERS PERFORMANCE WAREHOUSE INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Ltd.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. CALIFORNIA 3. 33-0753645  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/03/1987 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 8553 NE 14TH TERRACE OCALA FL 34479  
(Principal office address)
- 27440 BOSTIK CT. TEMECULA CA 92580  
(Current mailing address)
8. ANY AND ALL LAWFUL PURPOSES  
(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 NOT acceptable)
- Name: BRIAN MURPHY
- Office Address: 8553 NE 14TH TERRACE
- OCALA, Florida 33479  
(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.

☒

(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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## 12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Director: BRIAN MURPHY  
Address: 38332 CORTE ALEGRIA  
TEMECULA CA 92592  
Director: KENNETH MURPHY  
Address: 28920 VIA NORTE  
TEMECULA CA 92591

**B. OFFICERS**

President: BRIAN MURPHY  
Address: 38332 CORTE ALEGRIA  
TEMECULA CA 92592  
Vice President: KENNETH MURPHY  
Address: 28920 VIA NORTE  
TEMECULA CA 92591  
Secretary: \_\_\_\_\_  
Address: \_\_\_\_\_  
Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. ☒ \_\_\_\_\_  
(Signature of Director or Officer listed in number 12 of the application)  
14. BRIAN MURPHY PRESIDENT  
(Typed or printed name and capacity of person signing application)

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**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:**

BROTHERS PERFORMANCE WAREHOUSE INC.

FILE NUMBER: C2005308  
FORMATION DATE: 03/03/1997  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, 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.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of May 28, 2009.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State