Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100000424173)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

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

FOREIGN PROFIT/NONPROFIT CORPORATION

Technogym USA Corp.

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|------------|
|] |
| 05 |
| \$2,078.75 |
| |

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efficovr.exe

2/24/2010

COVER LETTER

| TO: New Filing Sc Division of Co | ornorations | | |
|---|--|---|---|
| SUBJECT: | /ECHN | OGYM USA | Core. |
| | | ration - must include si | |
| Dear Sir or Modam: | | | |
| The enclosed "Applicate of Existen transact business in Florida." | | for Authorization to T to register the above n | ransact Business in Florida," efferenced foreign corporation to |
| Please return all corres | spondence concerning this m | atter to the following: | |
| | ROMALD ScHA | G 161681 | |
| | (Nan | e of Person) | , |
| | /ECHMOLYM USA | 9 CORP | |
| | (Firm | √Company) | |
| | SEATTLE W. (City/St | Suite 3 | 30€ |
| | 0 | Address) | |
| | SEATTLE W. | A 98134 | |
| | (City/St | ate and Zip code) | |
| | | • | |
| For further information | onceming this matter, ples | ise call: | |
| 15 | | # / | |
| KOMALOJO | the (FER) at (A) | 623-1 | 488 × 524 |
| (Name of Peri | ion) (Ai | rea Code & Daytime To | elephone Number) |
| • | | | |
| STREET/CO | URIER ADDRESS: | MAILIN | G ADDRESS: |
| New Filing Se | ction | New Fili | ng Section |
| Division of Co | | | of Corporations |
| Clifton Buildin | ig : Center Circle | P.O. Box | . 6327 ee, FL 32314 |
| Tallahassee, Fl | | 1 411111035 | KG, FL 32314 |
| Enclosed is a check for | the following amount: | | |
| ☐ \$70.00 Filing Fee | ☐S78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee Contilled Copy | & \$2587.50 Filing Foo, Contificate of Status & Centified Copy |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| ~ | ASHING FAN Inder the law of which it is income 3 /14/00 If incorporation) | ротие пате идоргес | for the purpose of tran 9 /- 2 | sacring vizities)3 /2 字 8 | s in Fioriog) |
|-------------|--|--|---|-------------------------------|------------------------|
| r country u | nder the law of which it is incom | corated) | (FEI number, | f applicable) | |
| <u> </u> | 3/16/00 | 5 | PPR | | - 111 |
| (Date o | f incorporation) | (Duru | tion: Year comp. will co | ase to exist or ' | "регрецыі") |
| | JUL | 7, 2000 | | | |
| | ARRESCATIONS AND 14 | 60 # ANT 1507 # S | a, if prior to registration to determine penalty | lishitiry) | |
| 8 | 30 4th Ave S. (Princip) (Current) | 300 | SEATTE- | WA 98 | 134 |
| | /Princip | a) office oddress) | <u></u> | | |
| 6 | rancip | at other aggress. | FATTER ST | · house ! | 78134 |
| | 30 7, 7700 | ه کر در در | | | |
| | of corporation authorized in hor address of Florida registered | ne state or country to | be carried out in state | of Florida) | TAL TAL |
| .Yoursey | C T Corporation Syste | aun. | | | C A |
| Name: | 1200 South Pine Isla | ind Road | | | HA. |
| dress: | | | | | SECRETARY ALLAHASSE |
| | | | Elected 33324 | | 7 0F & |
| | Plantation | | | | |
| | Plantation (City) | | Florida 33324 (Zip code) | _ | |

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: _ Address: __ Vice Chairman: Claudio Bellini Director: Address: ________2805_43rd_Ave_w Spattle, WA 98199 Director: __ Address: __ B. OFFICERS Address: 98197 Vice President: _ Address: ___ Secretary: Treasurer: __ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) LAUDIO BELLINI KESIDENT

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



Secretary of State

1, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF TECHNOGYM USA CORP.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 3/16/2000.

I FURTHER CERTIFY that as of the date of this certificate, TECHNOGYM USA CORP. remains active and has complied with the filing requirements of this office.

Date: January 28, 2010

UBI: 602-021-910

STATE OF WASHINGTON TO THE STATE OF THE STAT

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State