

Division of Corporations Electronic Filing Cover Sheet

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.

(((H11000265364 3)))

14

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 : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

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

Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION PRO-HITTER CORPORATION

Динистинический принистиний принический принический принический принический принический принический принически				
Certificate of Status	0			
Certified Copy	0			
Page Count	05			
Estimated Charge	\$70.00			

Electronic Filing Menu

Corporate Filing Menu

Help

IN NOV - 7 PM 4: 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7.8HMars MOA 08 5011

Fax Server

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: PRO-HITTER COL	RPORATION			
P.CHMEZT.	Name of corporat	tion - must include suffix		
Dear Sir er Madam:				
The enclosed "Application by For "Certificate of Existence," or "Ce above referenced foreign corpora	artificate of Good S	standing" and check are subn		
Please return all correspondence	concerning this ma	atter to the following:		
Philip LoMedico				
	Name	of Person		
PRO-HITTER CORPORATION				
	Firm/C	Company'		
1439 Alicamar Parkway / PMB #257	١,			
	As	ddress	~	
Miramar, Forida 33027			SEC SEC	2811
***************************************	Ciry/Stat	te and Zip code	<u> </u>	7 - 40N IIB
feedback@probitter.com			ASS	*
E-mai	address: (to be us	ed for future annual report no	outication) m	.7 PJ
For further information concerning	ng this matter, pleas	se call:	FLO	⊋
Robert Gross	at (914	391 5773		မ
Name of Person		ca Code & Daytime Telepho	ne Number	(20)
STREET/COURIER AT New Filing Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		MAHLING AE New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl.	ction rporations	
Enclosed is a check for the follow	ring amount:			
□\$70.00 Filing Fee □\$78.	75 Filing Fee & tifficate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. 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.

	orp," "Inc," "Co," or "Corp.")		
(If name unavaila	ble in Florida, enter alternate corporate n	name adopted for the purpose of transacting business in Florida)	
2. NEW YORK		3	
	under the law of which it is incorporated)) (FEI number, if applicable)	
4, April 09, 198	36	5. PERPETUAL	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6. NO BUSINESS	TRANSACTED PRIOR TO REGISTRA	TION	
	•	ness in Florida, if prior to registration) 507.1502, F.S., to determine penalty liability)	
7. PRO-HITTER CO	ORP/BOX 883 / 245 NORTH MAIN ST	VIVE-T-00-1-00-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1	
	(Principal office	e address)	
ALTERNATE AI	ODRESS; PRO-HITTER CORP, 1439 M	IIRAMAR PARKWAY, PMB # 253, MIRAMAR, FL 33027	
Wholesale distrib	(Current mailing) outer of sporting good product PROHITT	L. Sie	2011 NOV -7
		or country to be carried out in state of Florida)	N N
9. Name and stree	address of Florida registered agent:	(P.O. Box NOT acceptable)	7 PR
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		ີ. ຈີ ເມ ນ ີ
	Tallahassee	, Florida ³²³⁰¹	
	·· (City)	(Zip code)	
	(0.5)	(Zip code)	
Having been nam designated in this further agree to co and I am familiar	gent's acceptance: ed as registered agent and to accept application, I hereby accept the application with the provisions of all statu with and accept the obligations of macorpation Service Company	service of process for the above stated corporation at the pointment as registered agent and agree to act in this capacites relative to the proper and complete performance of my position as registered agent.	city. I
Having been nam designated in this further agree to co and I am familiar	gent's acceptance: ed as registered agent and to accept application, I hereby accept the application of all statu with and accept the obligations of m	service of process for the above stated corporation at the pointment as registered agent and agree to act in this capacites relative to the proper and complete performance of my position as registered agent.	city. I

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.

Names and business addresses of officers and/or directors:

general de la	DEL 3 CARLS			
Chairman	3	4444 4 4444	. 4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Address:		12 14754 22 1147774 2 1 47774		
۲.				
Vice Chai	rman:	*******		
Address:				

Director:		***************************************		
•				
Director:				
Addressi		-,,		
,			**********	••••
B. OFF	CERS			
President:	PHILIP LOMEDICO		~ .	
	1430 Missing Parkasa / PMR 8253 Missinger Florida 33027	7 103	<u></u>	
Address:	COST MILLION S AGE TRAY T A SOCIETY (ASSERTING) OF GREAT SAME		6	
		SS		
Vice Pres	ident:	<u> </u>		Constant 1
Address:		77	3	
		20.5		E. Sal
Sucretaria		ĮÞ.	(D)	***************************************
				40-1-12-14-14-14-1
Address:	;			**********
Treasurer				******
Address:				
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and	d/or direc	tors.	
i 3	Signature of Director or Officer Signature of Director or Officer Signature of Director or Officer			
	Signature of Director or Officer	**********	*******	
are true a	and that he or she is aware that false information submitted in a document to the Department ree felony as provided for in \$.817.155, F.S.	se table es	anco no	CH
	UP ROBERT LOMEDICO (PRESIDENT)			

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

State of New York Department of State } ss

I hereby certify, that the Certificate of Incorporation of PRO-HITTER CORPORATION was filed on 04/09/1986, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.



201111070445 * 45

Witness my hand and the official seal of the Department of State at the City of Albany, this 04th day of November two thousand and eleven.

Daniel Shapiro

First Deputy Secretary of State

SECRETARY OF LATE.