# F1300000478

(Re	equestor's Name)	
(Ac	ldress)	,
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	Isiness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 28, 2013

ELAINE ARBON 983 E. CATTAIL DRIVE DRAPER, UT 84020

SUBJECT: GRW MANAGEMENT INC

Ref. Number: W13000005375



We have received your document for GRW MANAGEMENT INC and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 413A00002054

## **COVER LETTER**

TO: New Filing Section Division of Corporations	The state of the s	
SUBJECT:	must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standa above referenced foreign corporation to transact business	ing" and check are submitted to register the	
Please return all correspondence concerning this matter to	•	
Elaine Hebo	<u> </u>	
Name of Pe	USION Beapinegs, LP	
Firm/Compa	any	
983 E Caffail	Dr.	
Address	S	
Proper INT SUD O		
City/State and Zip code		
	future annual report notification)	
For further information concerning this matter, please cal		
Elaine Apploon at 801	495-3216	
Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
•	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

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

(State or country under the law of which it is incorporated)  4. December 2003 (Date of incorporation)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 12660 S. Fort St. Le 201, Deaper, UT 84020 (Principal office address)  PB3 E. Caffeil Dr. Deaper, UT 84020	ED TON
2. UHHH (State or country under the law of which it is incorporated)  4. December 2003 (Date of incorporation)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 12660 S. Fort St. Leaflerif Dr. Draper, UT 84020 (Principal office address)  White the sum of the law of which it is incorporated)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 12660 S. Fort St. Leaflerif Dr. Draper, UT 84020	20 54 J. 56
4. December 2003 (Date of incorporation)  (Duration: Year corp. will cease to exist or "perporation")  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 12660 S. Fort St. Leafter Dr. Draper, UT 84020  (Principal office address)  PB3 E. Caffee Dr. Draper, UT 84020	Floren
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(Date of incorporation)  (Duration: Year corp. will cease to exist or "perporation")  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. /2660 S. Fort St. Lead, Wafer, UT 84020  (Principal office address)  PB3 E. Caffeil Dr. Waper, UT 84020	
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(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. /2660 S. Fort St. Les 201, Draper, UT 84020  (Principal office address)  983 E. Caffeil Dr. Draper, UT 84020	
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(Principal office address)  983 E. Caffeil Dr. Draper, UT 84020	
983 E Caffeil Dr. Druper, UT 84020	
(Current mailing address)	<u>U</u>
8. Management of ARM-LP & Sole of High Priecisions (Purposé(s) of corporation authorized in home state or country to be carried out in state of Florida)	Bearings
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: John McVey	
Office Address: 19421 Coppersional Or	
New Port Pichey, 12, Florida 34654	
(City), Florida (Zip code)	
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporatio designated in this application, I hereby accept the appointment as registered agent and agree to act in t further agree to comply with the provisions of all statutes relative to the proper and complete performa duties, and I am familiar with and accept the obligations of my position as registered agent.	this capacity. I
John Mk/ey	•

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:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: DR. Volker Baptelt
Address: Nieclevhofanstrasse 105
Rimpar - D-97222 Rimpar - Germany
Vice President: Rowald S. Aphon
Address: 983 E Caffail Dr
Drapor, UT 84020
Secretary:
Address:
Treasurer:
Address:
NOTE: If pecessary you may attach an addendum to the application listing additional officers and/or directors.
13. Signature of Director or Officer
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
14 Vira Prasident

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



## **Utah Department of Commerce**

#### Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

02/01/2013 5430177-014202012013-1699196

## CERTIFICATE OF EXISTENCE

Registration Number:

5430177-0142

**Business Name:** 

GRW MANAGEMENT, INC.

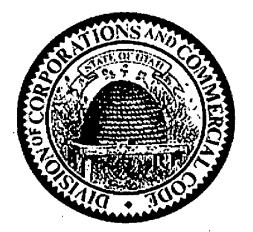
Registered Date:

November 06, 2003

Entity Type: Current Status: Corporation - Domestic - Profit

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Kathy Berg Director

Division of Corporations and Commercial Code

Hottay Berg