

# F13000002420

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

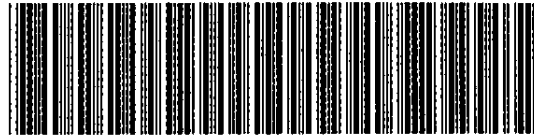
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2013 MAY 31 AM 10:45  
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FILED  
-13 MAY 31 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 667517 7545742

AUTHORIZATION :

COST LIMIT : \$ 78.75

ORDER DATE : May 29, 2013

ORDER TIME : 9:36 AM

ORDER NO. : 667517-005

CUSTOMER NO: 7545742

FOREIGN FILINGS

NAME: CWD-USA

CWD-USA, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** CWD-USA, 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," or "Certificate of Good Standing" 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:

Stephanie Messas, Esq

Name of Person

Deborah A. Nilson & Associates, PLLC

Firm/Company

10 East 40th Street, Suite 3310

Address

New York, NY 10016

City/State and Zip code

smessas@nilsonlaw.com ✓

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Messas, Esq

at (212) 687-1155

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:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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13 MAY 31 AM 10:15  
SECRETAR OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

**RESUBMIT**

Please give original  
submission date as file date.

June 3, 2013

CSC  
ATTN: SUSIE KNIGHT  
\*\*\*WALK-IN\*\*\*

SUBJECT: CWD-USA, INC.  
Ref. Number: W13000031834

We have received your document for CWD-USA, INC.. However, the document has not been filed and is being returned for the following:

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The city name need to be spelled out in number seven in reference to the principal and mailing address for the corporation.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap  
Regulatory Specialist II

Letter Number: 613A00013771

RECEIVED  
DEPARTMENT OF STATE  
18 JUN - 4 AM 10:55

**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. CWD-USA, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

CWD-USA, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

(State or country under the law of which it is incorporated)

3. 90-0064229

(FEI number, if applicable)

4. March 21, 2003

(Date of incorporation)

5. Perpetual

(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. 11999 San Vicente Blvd., Suite 300, Los Angeles, CA 90049

(Principal office address)

11999 San Vicente Blvd., Suite 300, Los Angeles, CA 90049

(Current mailing address)

8. Equestrian Equipment

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

Florida 32301

(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.*

Corporation Service Company

By: 

(Registered agent's signature)

Janet Budhu, Asst. Vice President

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.

FILED  
13 MAY 31 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Bertrand Pelletier

Address: 537 Rushmore Ave, Mamaroneck, NY 10543

Vice Chairman: Laurent Duray

Address: 24470 St Pardoux La Rivière, France

Director: Guillaume Girard

Address: 2 Rue de la République, 77590 Chartrettes, France

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Bertrand Pelletier

Address: 537 Rushmore Ave, Mamaroneck, NY 10543

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Deborah A. Nilson, Esq

Address: 10 East 40th Street, Suite 3310, New York, NY 10016

Treasurer: Laurent Duray

Address: 24470 St Pardoux La Riviere, France

**NOTE:** If necessary, 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. Deborah A. Nilson, Esq

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

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13 MAY 31 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**CERTIFICATE OF STATUS**

**ENTITY NAME:**

CWD-USA

**FILE NUMBER:** C2504377  
**FORMATION DATE:** 03/21/2003  
**TYPE:** DOMESTIC CORPORATION  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 29, 2013.

*Debra Bowen*

**DEBRA BOWEN**  
Secretary of State