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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

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CLERK OF STATE
TALLAHASSEE, FLORIDA

****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

Porsche Connect, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

2016 AUG 29 AM 11:52

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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. Porsche Connect, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "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. Delaware

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

3. 88-0301630

(FEI number, if applicable)

4. 06/23/1993

(Date of incorporation)

5. Perpetual

(Date of duration, if other than perpetual)

6. Upon Qualification

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. One Porsche Drive, Atlanta, GA 30354

(Principal office address)

same

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(Zip code)

9. 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.*

C T Corporation System

By: James M. Halpin

James M. Halpin

Assistant Secretary

(Registered agent's signature)

10. 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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11. Names and business addresses of officers and/or directors:

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: Andre Oosthuizen

Address: One Porsche Drive

Atlanta, GA 30354

Vice President: _____

Address: _____

Secretary: Joseph S. Folz

Address: One Porsche Drive, Atlanta, GA 30354

Treasurer: Thierry Kartochian

Address: One Porsche Drive, Atlanta, GA 30354

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

12. _____  8-19-16

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. John Boncuore, Asst. Secretary

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

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TALLAHASSEE, FLORIDA

**Attachment to Florida
Officers & Directors**

- | | | |
|---|-------------------|----------------------|
| 1 | Full Name: | John Boncuore |
| | Officer/Director: | Officer |
| | Officer's Title: | Asst. Secretary |
| | Director's Title: | |
| | Business Address: | One Porsche Drive |
| | City: | Atlanta |
| | State: | GA |
| | ZIP Code: | 30354 |
| 2 | Full Name: | Mitchell Rivers |
| | Officer/Director: | Officer |
| | Officer's Title: | Asst. Treasurer |
| | Director's Title: | |
| | Business Address: | One Porsche Drive |
| | City: | Atlanta |
| | State: | GA |
| | ZIP Code: | 30354 |
| 3 | Full Name: | Paula Campbell Kelly |
| | Officer/Director: | Officer |
| | Officer's Title: | Asst. Secretary |
| | Director's Title: | |
| | Business Address: | One Porsche Drive |
| | City: | Atlanta |
| | State: | GA |
| | ZIP Code: | 30354 |
| 4 | Full Name: | Klaus Zellmer |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Director's Title: | Director |
| | Business Address: | One Porsche Drive |
| | City: | Atlanta |
| | State: | GA |
| | ZIP Code: | 30354 |
| 5 | Full Name: | Andre Oosthuizen |

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Officer/Director:	Officer, Director
Officer's Title:	President
Director's Title:	Director
Business Address:	One Porsche Drive
City:	Atlanta
State:	GA
ZIP Code:	30354
6 Full Name:	Thierry Kartochian
Officer/Director:	Officer, Director
Officer's Title:	Treasurer
Director's Title:	Director
Business Address:	One Porsche Drive
City:	Atlanta
State:	GA
ZIP Code:	30354

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PORSCHE CONNECT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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TALLAHASSEE, FLORIDA



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Jeffrey W. Bullock, Secretary of State

Authentication: 202898741

Date: 08-26-16