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From:

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Account Number : FCA000000023

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: (614)280-3338

Fax Number

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FOREIGN PROFIT/NONPROFIT CORPORATION

Cochrane USA, Inc.

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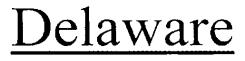
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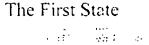
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FGISTER A FORE	TIGN CORPORATION TO T	RANSACT BUSINI	ES, THE FOLLOWING IS SUBMI ESS L! THE STATE OF FLORIDA.	
COCHRA (Foto pame of soc	NE USA INCOR	•		
*Inc.," *Co.,1 *Cor	p," "Inc," "Co," or "Corp.")			
(If name unav il at	le in Florida, enter alternate con	rporate name adopter	for the purpose of transacting busines	in Florida)
_		3		
DELAW	under the law of which it is inc	orporated)	(FEI number, if applicable)	
(Since or country	1 -			
12/18	fincorporation)	5. <u></u>	(Date of duration, if other than per-	etual)
. (Date 4	, men porane,			
	(Date first transpo (SEE SECTIONS 607.	ted business in Florid 1501 & 607.1502, F.	da, if price to registration) S., to determine penalty liability)	~ ~
1012_	WITH STREET NI			C-5000
		(Principal offi		AH A
-		(Current mailing add	ress, If different)	21 (\$\$f
Name and stree	t uddress of Florida registere	d agent: (P.O. Bo	x <u>NOT</u> acceptable)	in .
	C T Corporation System		411	77.
Name:		<u> </u>		Ç, , , , ,
Office Address:	1200 South Pine Island Read	* : '	* 1 * 4.	
	Plantation		, Florida	
	(City)		(Zip code)	
Having been nam designated in this	application, I hereby accep	it the appointment of all statutes relati or obligations of my	process for the above stated corpo as registered agent and agree to a ve to the proper and complete perf position as registered agent.	1 171 17113 CMD141411.
dutles, and I am j		man and a Comment		
lutles, and I am j	° C1	T Coruntation System	L. Offit a president	
dutles, and I am j		Corporation System	Peter Trawinski Assistant Secretary	•
dutles, and I am j	Jan Sund	<u>//. </u>	Assistant Secretary	•
By: 10. Attached is a the Department o	The Market	(Registered agent	Assistant Secretary	of this application ds in the jurisdiction
By: 10. Attached is a the Department o	certificate of existence duly f State, by the Secretary of S	(Registered agent	Assistant Secretary 'a signature) toom thou 90 days prior to delivery	of this application ds in the jurisdiction
10. Attached is a the Department o under the law of t	certificate of existence duly f State, by the Secretary of S	(Registered agent	Assistant Secretary 'a signature) toom thou 90 days prior to delivery	of this application ds in the jurisdiction
By: 10. Attached is a the Department o	certificate of existence duly f State, by the Secretary of S	(Registered agent	Assistant Secretary 'a signature) toom thou 90 days prior to delivery	of this application ds in the jurisdiction
By: 10. Attached is a the Department o under the law of t	certificate of existence duly f State, by the Secretary of S	(Registered agent	Assistant Secretary 'a signature) toom thou 90 days prior to delivery	of this application ds in the jurisdiction

•		
 Names and business addresses of officers and/or directors: 		
. DIRECTORS		
hairman:		
.ddress:		
		
fice Chairman:		
ddress:		
Director: ALISON MINDRY		
oddress: 1012 14th STREET NW STE 1400		•
WASHINGTON DC 2005.	·	
Director:		
Address:		
3. OFFICERS		
President: RICHARD BRUCE COCHRANG		
Address: 1012 14th STREET NW STE 11100	<u> </u>	
WASHINGTON DC 20005		
/ice President:	22.2	<u> </u>
Address:	Š.	~ <u>~</u>
(10)	rii-s	
Sixrelary:	-1 7	\triangleright
Address:	(7)	ċò
Freasurer:		<u> </u>
Acticss:		
	er and/or directors	
NOTE: If necessary, you may attach an addendum to the application listing additional office	ga and or unociois.	
Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 11 above) affirms are true and that he or she is aware that falso information submitted in a socument to the Department degree felony as provided for in \$.817.455, F.S.	that the lacts stated artment of State con	herein stitutes
13. RICHARD BRUCE COCHRANE PRESIDENT (Typed or printed mane and capacity of person signing application)		
(Typed or printed name and expacity of person signing application)		
(2013 Webun Klove Obbie		•
(39)) Wahan Ki ver (laher		•



Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "COCHRANE USA 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 TWENTIETH DAY OF MARCH, A.D. 2018.

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.

200 NAR 21 A 8: 38

i és

.i.

11

Authentication: 202359981

Date: 03-20-18

4269321 8300 SR# 20182067519

You may verify this certificate online at corp.delaware.gov/authver.shtml