F18000003844

(Requestor's Name)
(Address)
(123,000)
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1
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Seatified Continue to the seat of the seat
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only
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K. SALY AUG 22 2018

CORPORATION SERVICE COMPANY					
1201 Hays Street Tallhassee, FL 32301					
Phone: 850-558-1500					
ACCOUNT NO. : 12000000195					
REFERENCE : 355930 4300426					
AUTHORIZATION: Spelle man					
COST LIMIT : \$ 70.00					
ORDER DATE : August 20, 2018					
ORDER TIME : 9:14 AM					
ORDER NO. : 355930-010					
CUSTOMER NO: 4300426					
COSTORISK NO. 4300420					
FOREIGN_FILINGS					
NAME: SAVAGE GEAR AMERICAS, INC.					
MANIE. SAVAGE GEAR ANERICAS, INC.					
XXXX QUALIFICATION (TYPE: CO)					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING					
CONTACT PERSON: Emily Croft EXT# 62925					
EXAMINER:					

COVER LETTER

TO: Registration S				
Division of Co	orporations			
SUBJECT: Sava	nge Gear Americas, In			
	Name of cor	poration -	must include suffix	
Dear Sir or Madam:				
"Certificate of Exister	ation by Foreign Corpora nce," or "Certificate of Goign corporation to transac	ood Stanc	ling" and check are sub	
Please return all corre Jared Manes	spondence concerning th	is matter	to the following:	
	N	lame of P	erson	
Winston & Strawn LLP				
	Fi	rm/Comp	pany	
200 Park Avenue		•	•	
		Addres	SS .	
New York, NY 10166				
	City	/State an	d Zip code	
jmanes@winston.com				
	E-mail address: (to)	oe used fo	or future annual report r	notification)
For further information	on concerning this matter,	please ca	all:	
Jared Manes		12	294-6736	
Name of Pers		rea Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for ■ \$70.00 Filing Fee	the following amount: S78.75 Filing Fee Certificate of Sta		\$78.75 Filing Fee & Certified Copy	S87.50 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.

1. (Enter name of c	corporation; must include "If	NCORPORATED," "CO	MPANY," "CORPORATION."	
"Inc.," "Co" "C	Corp," "Inc." "Co," or "Corp.	.")		
(If name unavail	able in Florida, enter alterna	ite corporate name adopte	ed for the purpose of transacting be	usiness in Florida)
Delaware				,
2. (State or count	ry under the law of which it i	3 is incorporated)	(FEI number, if applic	able)
July 25, 2018				
4	e of incorporation)	5	(Date of duration, if other than	
(Date	e of incorporation)		(Date of duration, if other than	ı perpetual)
6.				
	D . C			
			da, if prior to registration)	
	(SEE SECTIONS		da, if prior to registration) S., to determine penalty liability)	
169 SE 23rd St. (
169 SE 23rd St. 7	(SEE SECTIONS		S., to determine penalty liability)	
169 SE 23rd St. 7	(SEE SECTIONS	607.1501 & 607.1502, F.	S., to determine penalty liability)	18 A
7	(SEE SECTIONS	607.1501 & 607.1502, F. (Principal offi	S., to determine penalty liability) ce address)	SECRETALLAR
169 SE 23rd St, 1	(SEE SECTIONS	607.1501 & 607.1502, F.	S., to determine penalty liability) ce address)	18 AUG 21 SECRETAR
7	(SEE SECTIONS Cape Coral, FL 33990	(Principal offi	S., to determine penalty liability) ce address) ress, if different)	21 ASS
7	(SEE SECTIONS Cape Coral, FL 33990 et address of Florida regis	(Principal offi (Current mailing addr stered agent: (P.O. Box	S., to determine penalty liability) ce address) ress, if different)	21 ASS
7	(SEE SECTIONS Cape Coral, FL 33990	(Principal offi (Current mailing addr stered agent: (P.O. Box	S., to determine penalty liability) ce address) ress, if different)	21 ASS
8. Name and stre Name:	(SEE SECTIONS Cape Coral, FL 33990 et address of Florida regis Corporation Service Con	(Principal offi (Current mailing addr stered agent: (P.O. Box	S., to determine penalty liability) ce address) ress, if different)	75 P
8. Name and stre	(SEE SECTIONS Cape Coral, FL 33990 et address of Florida regis Corporation Service Con 1201 Hays Street	(Principal offi (Current mailing addr stered agent: (P.O. Box	S., to determine penalty liability) ce address) ress, if different)	21 ASS
8. Name and stre Name:	(SEE SECTIONS Cape Coral, FL 33990 et address of Florida regis Corporation Service Con	(Principal offi (Current mailing addi	S., to determine penalty liability) ce address) ress, if different) c. NOT acceptable)	21 ASS
8. Name and stre Name:	(SEE SECTIONS Cape Coral, FL 33990 et address of Florida regis Corporation Service Con 1201 Hays Street	(Principal offi (Principal offi (Current mailing addi stered agent: (P.O. Box	S., to determine penalty liability) ce address) ress, if different) c NOT acceptable)	21 ASS

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.

Corporation Service Compa	apry /	Emily Croft
By: mily	roff	Asst. Vice President
	(Kegistered a	gent'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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Hans Maasbel Chairman: _ Erhvervsparken 14, DK-4621 Gadstrup, Denmark Address: _ Vice Chairman: Dorthe Hjortskov Erhvervsparken 14. DK-4621 Gadstrup, Denmark Address: Director: **B. OFFICERS** President: Address: Vice President: _____ Address: Secretary: ___ Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Hans Maasbol, Director (Typed or printed name and capacity of person signing application)

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "SAVAGE GEAR AMERICAS, 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-FIRST DAY OF AUGUST, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAVAGE GEAR

AMERICAS, INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF JULY,

A.D. 2018.

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

18 AUG 21 PH 3: In



6989351 8300

SR# 20186266504

Authentication: 203280112

Date: 08-21-18

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