F1800004383

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



09/20/18--01018--008 **87.50

SEP 22 2018 .

COVER LETTER

٠

TO:	Registration Section				
	Division of Corporations				

Ariat International, Inc.

ж

Name of corporation - must include suffix

Dear Sir or Madam:

4× .

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: Emily Wing

		Name	of Pe	erson		
Ariat International, Inc.						
		 Firm/C	Comp	any		
3242 Whipple Rd.						
,		A	ddres:	s		
Union City, CA 94587						
		City/Stat	te and	l Zip code	<u> </u>	
emily.wing@ariat.com		-				
	E-mail address:	(to be us	ed fo	r future annual report	notification)	
For further information	concerning this m	atter, plea	se ca	11:		
Emily Wing		510 at (474-4058		
Name of Perso	1	Area (Code	Daytime Telep	phone Number	
STREET/COU	RIER ADDRESS	5:		MAILING A	DDRESS:	
Registration Section				Registration Section		
Division of Corporations			Division of Corporations			
Clifton Building 2661 Executive Center Circle				P.O. Box 6327 Tallahassee, FL 32314		
Tallahassee, FL				rananassee, r	1, 52514	
Enclosed is a check for	the following amo	unt:				
\$70.00 Filing Fee	Certificate o			\$78.75 Filing Fee & Certified Copy	\$87.50 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.

Ariat International, Inc.

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

California			47357
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
9/4/1991		5	
(Date	of incorporation)		(Date of duration, if other than perpetual)
9/28/18			
	(Date first transacted busines (SEE SECTIONS 607,1501 & 607		
	Union City, CA 94587		
		ncipal offi	ce address)
	(Current ma	uiling addr	ess, if different)
Name and <u>stree</u>	t address of Florida registered agent: (P.O. Box	NOT acceptable)
Name:	Corporation Service Company		
fice Address:	1201 Hays Street	<u></u>	
	Tallahassee		32301 Florida
	(City)		(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.

Corporation Service Company By: Lamon) ones mont W Jones, Assistant VP (Registered agenf's signature)

10. Attached is a certificate of existence duly authenticated, not nor 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

,

.

.

•

.

,

Chairman:	Elizabeth Cross
Address:	3242 Whipple Rd.
	Union City, CA 94587
- Vice Chai	rman:
Address:	
Director:	John Fisher
Address:	1300 Evans Ave. #880154
	San Francisco, CA 94188
Director:	Kathryn Hall
Address:	One Maritime Plaza #5
	San Francisco, CA 94111
B. OFFI	CERS
President:	Elizabeth Cross
	3242 Whipple Rd.
	Union City, CA 94587
Vice Presi	dent:
Address:	
	·
Secretary:	Todd Levy
Address:	3242 Whipple Rd. Union City, CA 94587
Treasurer:	
Address:	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	9/17/18
are true a	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein nd that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S.
13	Todd Levy, Secretary
	(Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ARIAT INTERNATIONAL, INC.

FILE NUMBER:C1800674FORMATION DATE:09/04/1991TYPE:DOMESTIC CORPORATIONJURISDICTION:CALIFORNIASTATUS:ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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 September 17, 2018.

ALEX PADILLA Secretary of State