2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State DOCUMENT #; F99000004377 PUMA NORTH AMERICA, INC. 04-30-2001 90034 046 ***150.00 Principal Place of Business Mailing Address **5 LYBERTY WAY** 5 LYBERTY WAY WESTFORD MA 01886 WESTFORD MA 01886 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 04-3280787 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6.7 Name and Address of Current Registered Agent FELTINTON, LESLIE Street Address (P.O. Box Number is Not Acceptable) 1515 SOUTH EOLA DRIVE ORLANDO FL 32806 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition GM President ☐ Delete TITLE TITLE Piccola Jay 24 Riddle Drive PICCOLA, JAY J NAME NAME 24 RIDDLE DRIVE STREET ADDRESS STREET ADDRESS Bedford, NH 03110 CITY-ST-ZIP CITY-ST-ZIP BEDFORD NH **CFO** ☐ Delete TITLE Laemmermainn, Michael LAEMMERMANN, MICHAEL NAME NAME STREET ADDRESS 20 Monroe Place 20 MONROE EXEMMERMANN STREET ADDRESS CITY-ST-ZIP Concord, MA 017424 **CONCORD MA 01742** CITY-ST-ZIP - Change ☐ Addition TITLE TITLE ZEITZ, JOCHEN NAME NAME 164 BEACON ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOSTON MA** Delete Change TITLE TITLE dition GANSLER, MARTIN NAME NAME **WURZBURGER STRASSE 13** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP D-91072 GERMANY Secretary Peter Mastrostefano ☐ Delete TITLE ☐ Change Addition THE NAME NAME 5 lyberty way STREET ADDRESS STREET ADDRESS Westford, MA 01886 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all-other like empowered.

CITY-ST-ZIP

SIGNATURE: LE MASTOS LE FAMO DE SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

4/23/0

978-698-1000

Daytime Phone #