

M03000002163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

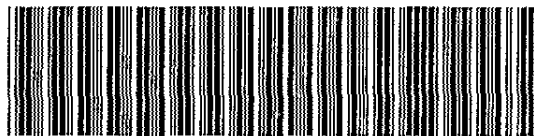
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700021126997

07/02/03--01057--011 **125.00

RECEIVED
03 JUL -2 2011:35
STATE
TALLAHASSEE, FLORIDA

Handwritten signature/initials

FILED
03 JUL -2 PM 1:18
STATE
TALLAHASSEE, FLORIDA

CT CORPORATION

July 2, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
03 JUL -2 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 5839261 WO
Customer Reference 1: 048424-600001
Customer Reference 2: CPP

Dear Secretary of State, Florida:

Please file the attached:

CPP US Operations Group, LLC (DE)
Registration
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. CPP US Operations Group, LLC
(Name of foreign limited liability company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 35-220-8197
(FEI number, if applicable)
4. 06/16/2003
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. 07/01/2003
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 10900 Wayzata Blvd., Minnetonka, MN 55305

(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒
9. The name and usual business addresses of the managing members or managers are as follows:

SEE ATTACHMENT

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

See Attachment

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Andrew C. Fisher

Typed or printed name of signee

Attachment to Florida

Nature of the LLC's Business

The company shall engage in any lawful activity for which companies may be organized to do business, including, without limitation, the business of designing, marketing, selling and providing enhancement or value added membership and warranty services.

FILED
JUL - 2 2018
TALLAHASSEE
STATE
FLORIDA

MANAGERS OF CPP US OPERATIONS, LLC

CONTACT INFORMATION

NAME	HOME ADDRESS	BUSINESS ADDRESS	
William Robert Anderson	860 Navajo Road West Medina, MN 55340	10900 Wayzata Blvd. Minnesota, MN 55305	RESIDENT STATUS USA
Jean Pampreen Vernor	4700 Creekwood Trl Maple Plain, MN 55359	10900 Wayzata Blvd. Minnesota, MN 55305	USA
Andrew C. Fisher	Bargates House Church Lane United Kingdom R6425NS Binfield	10900 Wayzata Blvd. Minnesota, MN 55305	United Kingdom

FILED
03 JUN-22 PM 1:18
SEATTLE
ALBUQUERQUE
TALLAHASSEE
INDIANAPOLIS

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

FILED
JUN 2 PM 1:18
TALLAHASSEE, FLORIDA

1. The name of the Limited Liability Company is:

CPP US Operations Group, LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

c/o C T Corporation System, 1200 South Pine Island Road

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Plantation

FL

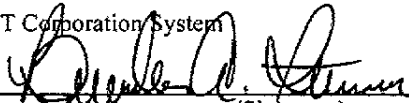
33324

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

C T Corporation System

By:


(Signature)

Beverlee Stuewe
Assistant Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Delaware

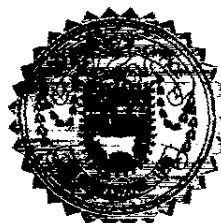
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CPP US OPERATIONS GROUP, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JUNE, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
03 JUL -2 PM 1:18
STATE OF DELAWARE
HARRIET SMITH WINDSOR
SECRETARY OF STATE



3670257 8300

030416701

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2492067

DATE: 06-24-03