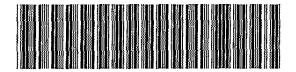
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY CHARAL

LAW OFFICES

#### WADE R. BYRD, P.A.

350 ROYAL PALM WAY, SUITE 409 PALM BEACH, FLORIDA 33480 TELEPHONE (561) 832-6929 TELEFAX (561) 832-9066

HARRY W. STEWART, JR. (1907-1988)

WADE R. BYRD, P.A. MICHEL BYRD ELLIS " " MEMBER OF NEW YORK AND FLORIDA BAR

March 7, 2007

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

> Re: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida -North American Polo League LLC

#### Gentlemen:

Enclosed herewith are the following:

- 1. Application by North American Polo League LLC to register in the State of Florida as a Foreign Limited Liability Company.
  - 2. Certificate of Designation of Registered Agent/Registered Office.
- 3. State of Delaware Authentication of legal existence in the State of Delaware as of March 2, 2007. Please note that we are advised that the State of Delaware no longer issues hard copies of this Authentication, but rather everything is by electronic format.
- 4. Check payable to the Florida Department of State in the amount of \$160.00 in payment of filing fees (\$100.00), Designation of Registered Agent (\$25.00), Certified Copy (\$30.00), and Certificate of Status (\$5.00).

If you have any questions concerning this Application, please contact the undersigned attorney for the applicant.

Very truly yours,

WRB:fww enclosues

pc: Mrs. Dana Shields

TO: Registration Section
Division of Corporations

#### **COVER LETTER**

SUBJECT: North American Polo League LLC (Name of Limited Liability Company)
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Dana Shields
(Name of Person)
North American Polo League LLC (Firm/Company)
(Firm/Company)
109 North Post Oak Lane Suite 425 (Address)
(Address)
Houston Tx 47024 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Dana Shields at (713) 263-2562.  (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Arca Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Begin{align*} \Begin{align*} \Pi & \Begin{align*} \Begin{align*} \Pi & \Begin{align*} \Begin{align*} \Pi &

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

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

I. North American Polo League LLC (Name of Foreign Limited Liability Company)	
2. De la ware  (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if appl	7
(Jurisdiction under the law of which foreign limited liability (FEI number, if application organized)	icable)
41912005 - Pernetual	
4. 61912005 5. Perpetual (Duration: Year limited liability co	omnany will couse to
exist or "perpetual")	migrany will overse to
6.	28 SK
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	5 3
	₹5 <b>%</b> .
7.3667.120th Avenue South	- 9 F
10/01/10/10 17 10 22/11/1	
Wellington Florida 33414 (Street Address of Principal Office)	
(VIIII) DE L'IMBINE DI L'IMBIN	9: <b>4</b> 5   AT ORIE
8. If limited liability company is a manager-managed company, check here	
John B. Grodman, 109 North Post Oak lanc Suite 425 House S.K. Johnston III, 144 Everglade Avenue, Palm Boach, Flor	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in 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:  Sports & Recreation—  Signature of a member or an authorized representative of a mem (In accordance with section 608,408(3), F.S., the execution of this document constitut an affirmation under the penalties of perjury that the facts stated herein are true.)	e foreign language, a
S.E. Jahnstond He	
Typed or printed name of signee	

1. The name of the Limited Liability Company is:

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.

North American Polo League LLC			
2. The name and the Florida street address of the registered agent and office are:			
Wade Byrd	O7 H		
(Name)	超声型		
350 Royal Palm Way Suite 409 Fibrida Street Address (P.O. Box NOT ACCEPTABLE)	AKKT OF STASSEE, FL		
Palm Beach FL 33480	9: 41 STATE FLORIDI		
City/State/Zip			
Having been named as registered agent and to accept service of process for the above statiliability company at the place designated in this certificate, I hereby accept the appointme agent and agree to act in this capacity. I further agree to comply with the provisions of al relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida Sta	ent as registered li statutes accept the		

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

## Delaware

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NORTH AMERICAN POLO LEAGUE 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 SECOND DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NORTH AMERICAN POLO LEAGUE LLC" WAS FORMED ON THE NINTH DAY OF JUNE, A.D. 2005.

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



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5477001

DATE: 03-02-07

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