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(Re	equestor's Name)						
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PICK-UP	☐ WAIT	MAIL					
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: Certified Copies	_ Certificates	of Status					
Special Instructions to	Filing Officer:						

Office Use Only



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2007 AUG -3 PH 1: 22 SECRETARY OF STATE

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COVER LETTER

TO: Registration Section

Divisio	n of Corporations						
SUBJECT: _			LLC ted Liability Co	mpany)			
Florida," Certi	Application by Foreign L ficate of Existence, and change to transact business in	neck are sul					
Please return a	ll correspondence concert	ning this ma	atter to the follo	wing:			
-	Dean	0. M (Nar	ne of Person)	Corporate Controller		_	
-			S LLC n/Company)		,		
-			Address) Florid te and Zip Code		SECHE JAK	2007 AUG -3	Establish States
-	Воса	Raton (City/Sta	te and Zip Code	334°	32 English	PN 1:22	
For further info	ormation concerning this i	natter, plea	ise call:		₽.	,,,	
Dea	Name of Person)		at (<u>56)</u> (Area Code) <u>417 - 74</u> & Daytime Tel	74 extended	3211 nber)	
Divisio P.O. Bo	in of Corporations ox 6327 ssee, FL 32314		STREET ADI Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations ng e Center Circle			
	heck for the following am 00 Filing Fee \$\bigcip\\$130.00 Fi		\$155.00 Filing	g Fee & S160	0.00 Filing Fee of Status	e, Certificat & Certified	

APPLICATION BY FOREIGN LIMITED LÍABILITY 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: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability" Company," "L.L.C.," "LLC.") Delaware
(Jurisdiction under the law of which foreign limited liability 3. (FEI number, if applicable) company is organized) (Date of Organization) (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 1515 N. Federal Hwy., Suite 206

Boun Raton, FL 33432

(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: 1515 N. Federal Hwy. Suite 206 FL 33432 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: Foot wear Industry 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 penaltics of perjury that the facts stated herein are true.) R. Wilborn

Typed or printed name of signee

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.

1. The name of the Limited Liability Company is:	
BBYHOS LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Donald R. Wilborn (Name) ARE RECRETED TO THE PROPERTY OF THE	
Donald R. Wilborn (Name) 1515 N. Federal Hwy. Suite 206 Florida Street Address (P.O. Box NOT ACCEPTABLE) Boca Raton, FL 33432 Boca Raton Street Address (P.O. Box Street Address Control of the Street Address Control of the Street Address (P.O. Box NOT ACCEPTABLE)	Section 2
Boca Raton, FL 33432	41742)

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, Florida Statutes.

(Signature)

\$ 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 "BBYHDS 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 SEVENTEENTH DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BBYHDS LLC" WAS FORMED ON THE NINTH DAY OF NOVEMBER, A.D. 2006.

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

AUTHENTICATION: 5847765

DATE: 07-17-07

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