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Division of Corporations

Fax Number : (850)617-6383

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Account Name : NRAI CORPORATE SERVICES, INC.

Account Number : I20080000023 Phone : (651)225-9500 Fax Number : (651)225-9579

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Foreign Limited Liability Company Wynit Distribution, LLC

| Certificate of Status | 0 |
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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:

| 1 | Wynit Distribution, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") | |
|---------------|--|---------------|
| con | name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and strach a copy of the visent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili mpany," "L.L.C." "LLC.") | vritten ty |
| ₹. | New York Jurisdiction under the law of which foreign limited liability company is organized) 3. 27-5005230 (FEI number, if applicable) | |
| 4. | 11/4/2010 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") | |
| б. | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | 11 MAY |
| 7. | 5801 East Taft Road East Taft Road | 1 |
| | N. Syracuse, NY 13212 (Street Address of Principal Office) | 9 |
| | If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows: Geoffrey Lewis 5801 East Taft Road, N. Syracuse, NY 13212 | ¥ 9: 50 |
| | Peter Richichi Jr 5801 East Taft Road, N. Syracuse, NY 13212 | |
| the) trans | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of reco jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under cath of the translator must be submitted.) | ards in |
| | Nature of business or purposes to be conducted or promoted in Florida: | |
| | Wholesale distributor of consumer electronics. | |
| | 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 pertury that the facts stated herein are true I am aware that any false information submitted in a document to the Department of State constitutes a third degree followy as provided for in s.817.155, F.S.) Peter Richichi Jr. | |
| | 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: | | | |
|--|------------|-------|----------|
| Wynit Distribution, LLC | | | |
| If unavailable, the alternate to be used in the state of Florida is: | | | |
| 2. The name and the Florida street address of the registered agent and office are: | Ž: | | |
| NRAI Services, Inc. | ;—; >>> | | (M.data) |
| (Name) | 第 第 | HAY- | |
| 515 East Park Avenue | L man | 9 | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | | EK. | ITI |
| Taliahassee, FL 32301 FL | SIATE | 9: 50 | O |
| City/State/Žip | A | لتسه | |

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

Jaki Bany, AST Ser.

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of New York Department of State } ss:

I hereby certify, that WYNIT DISTRIBUTION, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 11/04/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 06th day of May two thousand and eleven.

Daniel Shapiro

First Deputy Secretary of State

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