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H3-41879

SEP 1 9 2013 T. HAMPTON CR2E027 (9/10)

COVER LETTER

TO: Registration Section Division of Corporations

XMotion, LLC 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:

Steve Runyan		
Name of Person		
Kroger Gardis & Regas, LLP		
Firm/Company		
111 Monument Circle, Suite 900		
Address		
Indianapolis, IN 46204		
City/State and Zip Code		
srunyan@kgrlaw.com		
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

Steve Runyan	317	
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Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS: Division of Corporations

Registration Section P.O. Box 6327

Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee ■ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy



STEVE RUNYAN 317.777.7448 srunyan@kgrlaw.com

September 11, 2013

Florida Department of State Division of Corporations Attn: Tammy Hampton P.O. Box 6327 Tallahassee, FL 32314

Re: Letter Number 213A00019890 - XMotion, LLC

Ms. Hampton:

I have enclosed a copy of your letter dated August 20, 2013 (Letter No. 213A00019890) as well as the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida and Certificate of Designation of Registered Agent/Registered Office for filing. I have enclosed a copy of each document as well.

Please let me know if you have any questions or concerns.

Sincerely,

Steven E. Runvan

Enclosures

RECEIVED

13 SEP 18 PM 3: 52

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 20, 2013

STEVE RUNYAN KROGER GARDIS & REGAS LLP 111 MONUMENT CIR - STE 900 INDIANAPOLIS. IN 46204

SUBJECT: XMOTION, LLC Ref. Number: W13000046372

We have received your document for XMOTION, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 213A00019890

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:

	elude "Limited Liability Company," "L.L.C.," or "LLC.") pose of transacting business in Florida and attach a copy of the written
	ternate name. The alternate name must include "Limited Liability
_{2.} Delaware	3.
(Jurisdiction under the law of which foreign limited liability company is organized)	3(FEI number, if applicable)
4. July 16, 2013	_{5.} Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Not applicable	
(Date first transacted business in I (See sections 608.501 & 608.502 F	Florida, if prior to registration.) S. to determine penalty liability)
7. 4215 SB Merrion Rd.	
Lakeland, FL 33810	
(Street Addre	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
D. Bruce McMahan	: 5
-	90 days old, duly authenticated by the official having custody of records is copy is not acceptable. If the certificate is in a foreign language, a submitted is
	Management and sales
11. Nature of business or purposes to be conducted	or promoted in Florida: Management and sales.
	<u> </u>
Signature of a member or an	authorized representative of a member.
	recution of this document constitutes an affirmation under the true. I am aware that any false information submitted in a
penames of perjury that the facts stated herein are	tiue, i am aware that any raise information submitted in a

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Steven E. Runyan

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.

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: CT Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 City/State/Zip	1. The name of the Limited Liab XMotion, LLC	llity Company is:	
C T Corporation System (Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324	If unavailable, the alternate to be	used in the state of Florida is:	<u> </u>
(Name) 1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324	2. The name and the Florida street	et address of the registered agent and office are:	
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324	C T Corpo	oration System	
Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324		(Name)	
Plantation _{FL} 33324	1200 Sou	th Pine Island Road	
	Floric	la Street Address (P.O. Box NOT ACCEPTABLE)	
City/State/Zip	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, Florida Statutes.

(T Corporation System by:

Sierra Burris
Vice President & Assistant Secretary

(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

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "XMOTION, 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 FOURTEENTH DAY OF AUGUST, A.D. 2013.

5367521 8300

130984550

AUTHENTICATION: 0663012

DATE: 08-14-13

You may verify this certificate online at corp.delaware.gov/authver.shtml