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DECENTED

FILED

13 OCT I 4" AM 9: 46
SECRETARY OF STATE

OCT 1 5 2013

T. BROWN



ACCOUNT NO. : I2000000195
REFERENCE : 836868 7886153
AUTHORIZATION: Spellena
COST LIMIT : \$ 125.00
ORDER DATE: October 7, 2013
ORDER TIME : 10:27 AM
ORDER NO. : 836868-015
CUSTOMER NO: 7886153
FOREIGN FILINGS
NAME: ATLEAST USA, LLC
XXXX QUALIFICATION (TYPE: LL)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:

FILED 13 OCT 14 AM 9: 46 SECRETARY OF STATE APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION BY TRANSACT BUSINESS IN FLORIDA

TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE PUTH SECTION (OR 503, PLORIDA STATITIES, THE ROLLOWING IS SUBMITTED TO RECISTER A FOREIGN

INTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
ATLEAST USA, LLC
(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 writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC,")
2 Delaware 3. 45-3540937
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 09/23/2011 5. Paratual
(Date of Organization) (Date of Organization) (Duration: Year Inhited liability company will cease to exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 347 W. 36th Street, Suite 300
New York NY 10018
(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:
Mr. Manuel Barranca 347 W. 36th Street, Suite 300 New York, NY 10018
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under outh of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: 1. Poset / Distribute
X 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.)
X MANUEL BARRONCA

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	of the Limited Liability Company is:	
ATLEAST USA	A, LLC	
If unavailable,	t, the alternate to be used in the state of Florida is:	
2. The name a	and the Florida street address of the registered agent and office are:	
	Corporation Service Company	
	(Name)	
	1201 Hays Street	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee FL 32301	
	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.

Corporation Service Company

(Signature)

Sue G. Knight Assistant Vice President

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

Delaware

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The First State

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

DELAWARE, DO HEREBY CERTIFY "ATLEAST USA, 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 TENTH DAY OF OCTOBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATLEAST USA, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2011.

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

5042315 8300

131185446

AUTHENTY CATION: 0805870

DATE: 10-10-13

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