Jorda Department of State Divition of Corpora one Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130002301943)))



H130002301943ABCX

ge. Doing so will g	generate another cover sheet.	
		<u></u>
Division of Co	rnorations	* .
, on name	, (220) 221 7312	1
		*** () * *
Account Name	: SPIEGEL & UTRERA, P.A.	OPP.
Account Number		흨틐
Phone		-
Fax Number	: (305)860-2076	
mailings. Ente	ar outh one emert edamese bi	F202点。
:		
i		
i	ed Liability Company	
Foreign Limite	ed Liability Company	SECRETAR ABLAHASS
Foreign Limite	ed Liability Company ORTS USA, LLC	SECRETARY AHASSE
Foreign Limite	ed Liability Company ORTS USA, LLC	
Foreign Limite	ed Liability Company ORTS USA, LLC	SECRETARY AHASSE
E	Fax Number Account Name Account Number Phone Fax Number address for thi	

J. SAUL SBERRY EXAMINER

001 7 2013

Help

\$125.00

Electronic Filing Menu

Corporate Filing Menu

Estimated Charge

H130002301943

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

IN COMPLIANCE WITH SECTION 608.503, PLORIDA STATUTES, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE ST		EGISTER A FORI	EIGN
1. HMI SPORTS USA, LLC		2-2-2	
(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 o consent of the managers or managing members adopting the alternate Company," "L.L.C." "LLC.")			tten
₂ DELAWARE 3. 4	APPLIED FOR		
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)		
4. 10/03/2013	PERPETUAL		
(Date of Organization)	(Duration: Year limited liability company exist or "perpetual")		
6 UPON FILING	, ,	2013	
(Date first transacted business in Florida (See sections 608.501 & 608.502 F.S. to	a, if prior to registration.) determine penalty liability)	<u></u> 61	1
7, 2202 N. West Shore Blvd., Suite		5	:
Tampa, Florida 33607		- 3	* *
(Street Address of	Principal Office)	नुहा फ	
8. If limited liability company is a manager-managed con	mpany, check here 🗌		
9. The name and usual business addresses of the managi	ing members or managers are as foll	ows:	
Wilm (Ernst August Maria) Kemper - 2202 N. We			
Jürgen Hotes - 2202 N. West Shore	Blvd., Ste. 200, Tampa, F	L 33607	
Surger Frotes ALSE 14. Treat Charles			
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is	ys old, duly authenticated by the official having not accentable. If the certificate is in a first	ing custody of reco tion language, a	ards ir
translation of the certificate under cath of the translator must be submit	tted.)		
11. Nature of business or purposes to be conducted or pr	romoted in Florida: Any legal	<u>business</u>	
or activities permitted under the laws of the	United States and the State	of Florida	
Dily Kan	0		
	or zed representative of a member.		
(In accordance with section 608,408(3), F.S., the executive	on of this document constitutes an effirmation v	nder the	
penalties of perjury that the facts stated herein are true. I document to the Department of State constitutes a t	third degree felony as provided for in \$.8)?	'.155, F.S.)	
Wilm (Ernst August Maria		,	
Typed or printed no	ame of signee		

H130002301943

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.

	f the Limited Liability Company is: PORTS USA, LLC			
If unavailable,	the alternate to be used in the state of Florida is:			
2. The name a	nd the Florida street address of the registered agent and office are:			
	SPIEGEL & UTRERA, P.A.		2013 OCT	" ,
	1840 SW 22nd Street, 4th Floor	- ************************************	91	9 mm, store 9 store 1
	Florida Street Address (P.O. BOX NOT ACCEPTABLE) Miami, FL 33145 - 33145		AM 9: 1	

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.

Spiezel & UTLERA, P.P.

City/State/Zip

\$ 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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HMI SPORTS 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 EIGHTE DAY OF OCTOBER, A.D. 2013.

2013 OCT 16 AM 9: 17

5409712 8300

131175878

You may verify this certificate online at corp.delaware.gov/authmer.ahtml

H130002301943

Jeffrey W. Bullock, Secretary of State

DTHENTY CATION: 0798959

DATE: 10-08-13