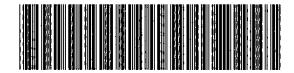
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PICK-UP	☐ WAIT	MAIL
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Office Use Only



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January 13, 2014

DOMENICO MIMMO PILEGGI 10020 W OAKLAND PARK BLVD. SUNRISE, FL 33351

SUBJECT: F L O W TEKNOLOGIES USA, LLC

Ref. Number: W14000002163

We have received your document for F L O W TEKNOLOGIES USA, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Agnes Lunt Regulatory Specialist II

Letter Number: 014A00000736

#### **COVER LETTER**

Division of Corporation	s				
SUBJECT: Authorization 1		orida mited Liability Company			
The enclosed "Application by Fo Existence, and check are submitted	reign Limited Liability Cored to register the above refe	npany for Authorization to Trerenced foreign limited liabilit	ansact Business in Florida," ry company to transact busing	Certificate ess in Flor	e of rida
Please return all correspondence	concerning this matter to th	ne following:			
<u>Domenico Mir</u>		Jame of Person			
	•	tuine of Ferson			
<u>FLÖW teknolo</u>	gies USA, LLC				
	F	irm/Company			
			20 E6 E6	2014 FES	
10020 W Oak	land Park Boulevard	Address	<del></del>	111 -11	7
			HASSEE HASSEE	3 20	
Sunrise F	lorida 33351		37.K		
		State and Zip Code	L1_ LL.		
			55 55 10 10 10 10 10 10 10 10 10 10 10 10 10	₩	1
kkovats@flo	wteknologies.com	ed for future annual report not	ification	25	
	L-man address. (to be use	a for future annual report not	ilication)		
For further information concernir	g this matter, please call:				
Domenico Mimmo Pi		at (954) <u>394-7</u>			
Name	of Person	Area Code Dayti	me Telephone Number		
<b>MAILING ADDRESS:</b>		ET ADDRESS:			
Division of Corporations		on of Corporations			
Registration Section P.O. Box 6327		ration Section n Building			
Tallahassee, FL 32314	2661 1	Executive Center Circle lassee, 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, Ce of Status & Certified C		

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. F L Ö W teknologies 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. South lordan . Utah . (Jurisdiction under the law of which foreign limited liability company is organized)  3. 46-4152753 (FEI number, if applicable)
4. <u>January 15, 2014</u> (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 10020 W Oakland Park Blvd, Sunrise, Florida, 33351
(Street Address of Principal Office)
6. 3410 Galt Ocean Drive, suite 2008 N, Fort Lauderdale, Florida, 33308
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Domenico Mimmo Pileggi , Managing Member
3410 Galt Ocean Drive, Suite 2008 N, Fort Lauderdale, Florida , 33308
8. Attached is an original certificate of existence, no more than 90 days old, duty 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 cath of the translator must be submitted.)  Signatury of an authorized person
(In accordance with section 605.0203, 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 felony as provided for in s.817.155, F.S.)
Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:	
F L Ö W teknologies USA . 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:	2014 FEB 20
Domenico Mimmo Pileggi	A S
(Name)	PH STA
10020 W Oakland Park Boulevard Florida Street Address (P.O. Box NOT ACCEPTABLE)	3 N W
Fibrida Guest Fideress (F.O. Box 110 FACES FABEL)	<b>19 19 19</b>
Sunrise Florida FL 33351	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above stationary at the place designated in this certificate, I hereby accept the appointme registered agent and agree to act in this capacity. I further agree to comply with the provistatutes relating to the proper and complete performance of my duties, and I am familiar vaccept the obligations of my position as registered agent as provided for in Chapter 605, I Statutes.	ent as isions of all with and

Filing Fee for Application

**Certified Copy (optional)** 

Designation of Registered Agent

**Certificate of Status (optional)** 

\$ 100.00

\$ 25.00

\$ 30.00

5.00



#### **Utah Department of Commerce**

Division of Corporations & Commercial Code 160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849

Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

01/29/2014 8861639-016001292014-2319767

### **CERTIFICATE OF EXISTENCE**

**Registration Number:** 

8861639-0160

**Business Name:** 

FLOWTEKNOLOGIES USA, LLC

Registered Date:

November 21, 2013

Entity Type:

LLC - Domestic

**Current Status:** 

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Hacky Berg-

Kathy Berg Director

Division of Corporations and Commercial Code