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Office Use Only



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ACCOUNT NO. : I2000000195

REFERENCE : 012142/

7925055

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: February 12, 2014

ORDER TIME : 11:58 AM

ORDER NO. : 012142-020

CUSTOMER NO: 7925055

FOREIGN FILINGS

NAME: P\S\L GROUP AMERICA LIMITED

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: Ashley Isbert -- EXT# 3580

EXAMINER:

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: P\S\L Group America Limited 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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") _{3.} 52-2124029 2 Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5 1140 Avenue of the Americas, 14th Floor New York, NY 10036 (Street Address of Principal Office) 6. 1140 Avenue of the Americas, 14th Floor New York, NY 10036 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Michele Fearon, Manager, 1140 Ave. of the Americas, NYC 10036 James Karr, Manager, 1140 Ave. of the Americas, NYC 10036 8. Attached is an original certificate of existence, no more than 90 days old, duly 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 oath of the translator must be submitted) Signature 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.) James Karr 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: | | |
|---------------------------------|--|---|--|--|
| P\S\L Group America Limited LLC | | | | |
| If unavailable, | , the alternate to be used | in the state of Florida is: | | |
| 2. The name a | and the Florida street add | dress of the registered agent and office are: | | |
| | Corporation Service Co | ompany | | |
| | —————————————————————————————————————— | (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 605, Florida Statutes.

Corporation Service Company

Sue G. Knight

Assistant Vice President

(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 "P\S\L GROUP AMERICA LIMITED 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 TWELFTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "P\S\L GROUP

AMERICA LIMITED LLC" WAS FORMED ON THE EIGHTH DAY OF JULY, A.D.

1998.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

2911833 8300

140167488

AUTHENTY CATION: 1129771

DATE: 02-12-14

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