### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878~5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email:	Address:			
	AUU			

### Foreign Limited Liability Company **EAGLERIDER FINANCE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu ( ) SHelp | Sol Shel

K. SALY EXAMINER

7/23/2014

#### **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: EagleRider Finance 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:						
Chela Holton						
Name of Person						
Eaglerider Finance LLC						
11860 S. La Pienega Blud.						
Los Augeles PA 90250 City/State and Zip Code						
Chela @ eagle vider. com  E-mail address: (to be used for future unnual report notification)						
For further information concerning this matter, please call:						
Chela Holton at 310 536-6777 X 1177  Name of Contact 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:  \$\Bigsiz \$125.00\$ Filing Fee \$\Bigsiz \$130.00\$ Filing Fee & \$\Bigsiz \$155.00\$ Filing Fee & \$\Bigsiz \$160.00\$ Filing Fee, Certificate Copy  \$\Bigsiz \$125.00\$ Filing Fee & \$\Bigsiz \$160.00\$ Filing Fee, Certificate Copy  \$\Bigsiz \$160.00\$ Filing Fee, Certificate Copy						

# 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:

] EagleRider Finance, 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 "L.L.C.")
2. Minnesota  (Jurisdiction under the law of which foreign limited liability  (FEI number, if applicable)
(FEI number, if applicable)
4
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5.
11860 B. La Cienega Blvd. Los Angeles CA 90250 00
6. P.O. Box 2346, Hawthorne, RA 90257
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Jeff Brown - COO - 11860 S. La Cienya Blud, Los Angeles CA 90250
Chris McIntyre - Nes - 11860 8. La Genega Blvd Los Angeles C1 90250
Peter Wurmer - VP - 11860 S. La Cienego Bluch Los Angeles CA 90250
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 eccordance with section 605 020), F.S., the execution of this document constitutes an affirmation under the potaltics of perjury that the facts stated herein are true. I am aware that any falsa information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.)
Typed or printed name of signee
Typed or printed name of signee

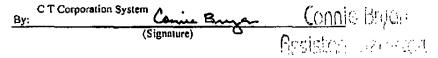


# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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.

	of the Limited Liabili	• • •				
`	$\smile$	sed in the state of Florida is:				
2. The name	and the Florida street	address of the registered agent and office are:				
	C T Corporation System					
	(Name)					
	1200 South Pine Island Road					
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Plantation	FL 33324				
		City/State/Zip				
liability comp	pany at the place desig	gent and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of al				

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.



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

#### Office of the Minnesota Secretary of State Certificate of Good Standing

1, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

EagleRider Finance LLC

Date Filed:

08/07/2007

File Number:

2461478-2

Minnesota Statutes, Chapter:

322B

Home Jurisdiction:

Minnesota

This certificate has been issued on:

07/22/2014



Mark Ritchie
Mark Ritchie

Secretary of State State of Minnesota