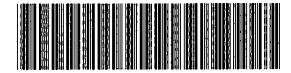
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(Re	equestor's Name)	
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CONTROL OF FILMS

14000

RETARY OF STATE AHASSEE, FLORIDA

T. HAMPTON



ON SERVICE COMPANY					
ACCOUNT NO. : 12000000195					
REFERENCE : 409462 7781277					
AUTHORIZATION :					
COST LIMIT : \$\125.00					
ORDER DATE : December 5, 2014					
ORDER TIME : 9:55 AM					
ORDER NO. : 409462-015					
CUSTOMER NO: 7781277					
FOREIGN FILINGS					
NAME: DIABLOSPORT, 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: Courtney Williams EXT# 62935					

EXAMINER:



December 8, 2014

CSC COURTNEY WILLIAMS

Ref. Number: W14000072886

being returned for the following correction(s):

Please give original submission date as file date.

SUBJECT: DIABLOSPORT, LLC

We have received your document for DIABLOSPORT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer 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.

Tammy Hampton Regulatory Specialist III

Letter Number: 714A00025758

DEPARTMENT OF STATE

ESUBMIT

## DIABLOSPORT. GASOLINE AND DIESEL TUNING SYSTEMS

DiabloSport Corporate Headquarters 1865 SW 4th Ave. Suite D-2 Delray Beach, FL 33444 www.diablosport.com

Effective December 1, 2014

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: DiabloSport, LLC

Ladies and Gentlemen:

This letter is to inform the Department of State that that DiabloSport, Inc., a Michigan corporation authorized to conduct business in Florida under Document No. F07000001268 (the "Corporation"), is affiliated with DiabloSport, LLC, a Delaware limited liability company applying for authority to conduct business in Florida (the "LLC"). The Corporation authorizes the use of the name "DiabloSport" in Florida by the LLC.

Please contact the undersigned with any questions or concerns regarding this affiliation.

Best regards,

DIABLOSPORT, INC.

Michael Johnston

COO

16180882.1

Phone: 877-396-6614

#### 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. DiabloSport, 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.") Delaware (Jurisdiction under the law of which foreign limited liability 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) 1865 SW 4th Ave, Suite D2 Delray Beach, FL 33444 (Street Address of Principal Office) 6: 1865 SW 4th Ave, Suite D2 Delray Beach, FL 33444 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc: 1865 SW 4th Ave, Suite D2 Michael W. Wesley, CEO, President, Secretary Delray Beach, FL 33444 1865 SW 4th Ave, Suite D2 Michael S. Johnston, COO and Treasurer Delray Beach, FL 33444 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 perjuty 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

Michael Johnston

#### 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:	
DiabloSport, Li	LC		
If unavailable	, the alternate to be used	in the state of Florida is:	
2. The name	and the Florida street ad	ldress of the registered agent and office are:	
	Corporation Service Co	ompany	
		(Name)	
	1201 Hays Street		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee	32301 FL	
		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

By:

(Signature)

S 100.00 Filing Fee for Application

S 25.00 Point of Parising Assistant Application

\$ 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 "DIABLOSPORT, 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 FIFTH DAY OF DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIABLOSPORT, LLC" WAS FORMED ON THE SECOND DAY OF DECEMBER, A.D. 2014.

5650184 8300

141491701

AUTHENTICATION: 1925898

DATE: 12-05-14

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