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COVER LETTER

	stration Section ion of Corporations	
T SUBJECT:	Turbine USA, LLC	
SOBJECT	Name of Limited Liability Company	
	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifical check are submitted to register the above referenced foreign limited liability company to transact business in Florida,	
Please return al	all correspondence concerning this matter to the following:	
	Sheila Kinehan	
	Name of Person	
	PAFS Ireland Ltd.	
	Firm/Company \	
	Unit J Block 1, Shannon Business Park	
	Address	
	Shannon, Co. Clare, Ireland	
	City/State and Zip Code	
	SKinehan@phxa.com	
	E-mail address: (to be used for future annual report notification)	
For further info	ormation concerning this matter, please call:	
Shei	eila Kinehan +353 61-475520	
	Name of Contact Person Area Code Daytime Telephone Number	
Division Registr P.O. B	LING ADDRESS: ion of Corporations btration Section Box 6327 chassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	a check for the following amount: 25.00 Filing Fee © \$130.00 Filing Fee &	

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

IN COMPLIANCE WITH SECTION 605 D902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Turbine USA, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (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 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2401 Kerner Boulevard San Rafael, CA 94901 (Street Address of Principal Office) PAFS Ireland Ltd., Unit J Block 1, Shannon Business Park Shannon, Co. Clare, Ireland (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Gary Eakins, Manager, 602 Walnut Street, Apt 2, Edmonds, WA 98020 John Slowik, Manager, 136 East 64th Street, Apt 5a, NY 10065 Brian Hayden, Manager, Prague Villa, Castletroy, Co. Limerick, Ireland 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 \$.817.155, F.S.) John Slowik

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 Turbine USA	of the Limited Liability Company is:			
If unavailable,	the alternate to be used in the state of Florida is:			
2. The name a	and the Florida street address of the registered agent and office are:	TALL	귦	
Florida Filing & Search Services, Inc.		- A≳	FE8	Ü
(Name)		TARN ASSI	=	() () () ()
•	155 Office Plaza Dr., Suite A	m m	3	1
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	STAFE FLORIDA	£.	
	Tallahassee, 32301	D.F.	တ	
	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.

(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

DACE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TURBINE 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 ELEVENTH DAY OF FEBRUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TURBINE USA, LLC" WAS FORMED ON THE FIRST DAY OF NOVEMBER, A.D. 2013.

15 FEB I I PH L: L6

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5425853 8300

150180770

AUTHENTY CATION: 2113335

DATE: 02-11-15

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