Florida Department of State

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SECRETARY OF STATE

Foreign Limited Liability Company Parella Motorsports Holdings, LLC

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| | COV | ER LETTER | | |
|--|--|--|---|--|
| TO: Registration Section Division of Corporations | | | | |
| SUBJECT: PARELLA MOTORSPOR | ts Holdings, Ll | c | | |
| | Name of Limite | d Liebility Company | | |
| The enclosed "Application by Foreign Li- Existence, and check are submitted to reg | nited Liability Complister the above refer | enced for Authorizationsed foreign limited | on to Transact Business i d fiability company to tra | in Florida," Certificate o insact business in Florida |
| Please return all correspondence concerni | ing this matter to the | following: | | |
| Thomas 1. Foster | | | | |
| | N ₁ | une of Person | | |
| Law Office of Foxer & | Faster, P.C. | | | |
| | Fi | пп/Сопрану | | |
| 2500 Dallas Parkway, S | luite 108 | | | |
| | ··· | Address | | |
| Plano, TX 75093 | | | | |
| | City/s | tote and Zip Code | | |
| tp@parellagroup.com | uil address: (to be use | | | |
| For further information concerning this m | | tira ikithe madidi refu | ar mancathary | |
| , and the second | initial, france contra | | | |
| Thomas J. Foster Nume of Contact | | _ at (972 | 991-1606 Deytime Telephone | <u> </u> |
| MAILING ADDRESS: Olivision of Corporations Registration Section P.O. Box 6327 Tulishassee, FL 32314 | STREE Division Registre Clifton 2661 Ex | TADDRESS: n of Corporations ation Section Building secutive Center Circ ssee, Fl. 32301 | | Number |
| | ing amount: 30.00 Filing Fee & rtificate of Status | □ \$155.00 F(ling Certifled Cop) | | ling Fee, Certificate to Certified Copy |
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JENANY OF STATE

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:

| (. | VIV- V | | GS, LLC | | | | | 7 H 31 T | <u> </u> | |
|--|--|----------------------------|---|----------------------------|--|---|-----------------------|----------------------|----------------------------|-----------------------------------|
| | Name of Foreign Li | mited Liability | Company; must | include "Lin | nned Llabil | ity Compa | ny," "L. L. | ∴," or "I.i. | C.") | |
| (If name unuva | lable, cuter alternat | e name adopte | d for the purpose | e of transactir | g business | in Florida | The alteri | ale paste l | nust include " | .imited |
| Listbisty Comp | any,""LLC," or "I | .i.c.') | • • | | - | | | | | |
| 2. Texas | | | · | _ 3 | | | | | | |
| | under the law of wi organized) | ich föreiga Un | niied Hability | | | (1.151 u | umber, If i | bhneanet | | |
| 4. April 1, 2 | 015 | Marie Carl | immaneted busine | ere in Glorida | i (miny to | numicimilia | <u> </u> | | | |
| | | (See sections (| 605.0904 & 605. | .0905, F.S. ю | determine | penalty lia | bility) | | | |
| 5. 1598 HA | RT ST STE 100, | SOUTHLAK | E, TX 76092-9 | 720 | | | | | | _ |
| - | | | (Normal A | ddress of Frin | eres (Allen | | | | | |
| - 1409 11a I | ን ተወተ ሮሞሞ ነለስ ፍ | ስር ነ ቸዛር ልጅን | • | | імраі Опіс | u) | | | | |
| 6. 1398 HA | T ST STE 100, S | OUTHLAKI | C, 1X 70092-9 | 720 | | | | | | |
| | | | | av cellen telal | =:\ | | | | | |
| | | | (| Mailing Add | n35) | | | | | |
| 7. The nar | ne, title or cap | acity and ac | ddress of the | person(s) | who has | /have a | uthority | to mana | ge is/are: | |
| | | | | | | | | | | |
| Anthony J. I' | arella and Larry I | nnes "Manager | rs | | | | | | | |
| | | | | | | | | - | | |
| 1598 Hart St | rees, Suite 100 | | | | - | | | | | |
| | | | | | - | | | | <u></u> | |
| 1598 Hart St Southlake, T | | | | | | | | | | |
| Southlake, T | X 76092 | certificate | of existence | no more | than 90 c | lavs old | duly o | thentico | ted by the | —— |
| Southlake, T | X 76092 | certificate (| of existence, | , no more t | ihan 90 c | iays old | , duly ni ganized. | athentica (A phot | ted by the | attici |
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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.

| | e of the Limited Liability Co | ompany is: | | | |
|--|--|--|---|--|--|
| If unavailab | le, the alternate to be used in | n the state of Floridu is: | | | |
| 2. The nam | e and the Florida street addr | ress of the registered agent and office | are: | | |
| | C T Corporation System | | 海道 皇 四 | | |
| | (Name) | | | | |
| | 1200 South Pine Island Ro | ad | | | |
| | Florida Stree | el Address (P.O. Box NOT Acceptable) | 1: 43 | | |
| | Plantation | FL_33324 | ω | | |
| | | City/State/Zip | | | |
| liability con registered a statutes rela | npany at the place designated gent and agree to act in this sting to the proper and comp | and to accept service of process for the d in this certificate, I hereby accept the capacity. I further agree to comply we lete performance of my duties, and I arregistered agent as provided for in Ch | e appointment us ith the provisions of all on familiar with and | | |
| | By: | (Signature) Kimberly Steinmetz Vice Prasident & Assis | ; stant Secretary | | |
| | S 2: | 0.00 Filing Fee for Application 5.00 Designation of Registered Ag 0.00 Certified Copy (optional) | • | | |

\$ 5.00 Certificate of Stutus (optional)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Parella Motorsports Holdings, LLC (file number 801623960), a Domestic Limited Liability Company (LLC), was filed in this office on July 11, 2012.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 03, 2015.



Carlos H. Cascos Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709 TID: 10264

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