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(Re	equestor's Name)			
(Ac	idress)	······································		
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PICK-UP	· WAIT	MAIL		
(Bi	usiness Entity Nan	ne)		
(Do	ocument Number)			
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#### CT CORP

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724 850-508-1891 (cell)

Date:	12/20/16 ACCT. 120160000072	4: ()
Name:	Outdoor Team Works LLC	
Document #:		
Order #:	10298285	
Certified Copy of Arts & Amend:		
Plain Copy: Certificate of Good Standing:		
Apostille/Notarial Certification:	Country of Destination: Number of Certs:	
Filing:	Certified: Plain: COGS	•
Availability Document Examiner Updater Verifier W.P. Verifier	Amount: \$ 160.00	

Thank you!

#### CT CORP

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Name:	Outdoor Team Works LLC	
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Filing;	Certified: Plain: COGS:	
Availability Document Examiner Updater Verifier W.P. Verifier	Amount: \$ 160.00	· · · · · .

Thank you!

#### **COVER LETTER**

TO:		ation Section of Corporations	3				
SUBJE		tdoor TeamWorks					
			Name of L	imited Liability C	ompany		
The en- Exister	closed "Ap	pplication by Fore seck are submitted	ign Limited Liability Compa to register the above referer	any for Authorizat	ion to Trai ed liability	nsact Business in Florida," company to transact busine	Certificate of ess in Florida
Please	return all o	correspondence co	oncerning this matter to the f	ollowing:			
		Trevor Quick					
			Na	me of Person	<u> </u>		
		King & Spaldin	g LLP				
Firm/Company							
		1180 Peachtree	St. NE				
				Address			
		Atlanta, GA 303	309				
			City/Sta	ate and Zip Code			
		kamaliszewski@t	oasspro.com; tquick@kslaw.	com			
	-	<del></del>	E-mail address: (to be used	for future annual	report noti	fication)	
For fur	ther inforr	nation concerning	this matter, please call:				
	Trevor	Quick		404 at (	572-488	83	
		Name of	Contact Person	Area Code	Dayı	time Telephone Number	
	Division Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division of Registrati Clifton Bi 2661 Exec	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclos		eck for the followi .00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	3\$155.00 Filin Certified Copy	g Fee &	\$160.00 Filing Fee, Ce of Status & Certified Cop	

TO:

### 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. Outdoor TeamWorks, L	LC lign Limited Liability Company; must i	include "Limited Liab	Hity Company," "L.C.," or	"LLC.")		-
(vano or rote	igh Emilies clasmity company, must	Ending Line	inity Company, Society, Co.			_
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of	of transacting business	in Florida. The alternate name	e must incl	ud <b>e</b> "Lir	nited
2. Delaware	J. 223. ,	3. 45-3171725				
	of which foreign limited liability	J	(FEI number, if applicable)		•	-
07/22/2016						
te	(Date first transacted business (See sections 605.0904 & 605.09	in Florida, if prior to	registration.)	<del>.</del>		
2500 East Kearney	(350 100110110 0031070 1 20 003107		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_		
Springfield, MO 65898	1					
	(Street Address of Pri	ncipal Office)		-		
Same as above				-		
				<u></u>	Š	
	(Mailing Ad	ldress)			)30	
7. Name and street addres	s of Florida registered agent: (P.O	. Box NOT accepta	ble)	32 20 20 20	2	
Name:	C T Corporation System			Light.	~~	lj t Washing
Office Address:	1200 South Pine Island Road		•	- FS	AM #	Principal Control
	Plantation		, Florida 33324	200 A	<del>.c.</del>	
designated in this application complywith the provision accept the obligations of r	tance: gistered agent and to accept servic tion, I hereby accept the appointm ons of all statutes relative to the pr ny position as registered agent. C T Corporation Syst	ent as registered ag coper and complete	ent and agree to act in thi performance of my duties	is capacity	. I furt	her agree
	(Registere	cd agon's signature)	7	-		
8. The name title or cana	icity and address of the person(s) w	yho has/have authori	ty to manage is/arc:			
-	00 East Kearney, Springfield, MO		.,			
Tim L. Eisenhour, Vice P	resident and Treasurer, (same addre	ess as above)	<del></del>			
Ellen Lambath, Assistant	Secretary, Larry Wilcher, Vice Pre	sident and Secretar	(same addresses as above	)		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days of which it is organized. (If the certabolited)  Signature of	tificate is in a foreig	n language, a translation of	custody of f the certif	records	s in the der oath
This document is executed submitted in a document to	l in accordance with section 605.02 the Department of State constitute Larry Wilcher	.03 (1) (b), Florida S	tatutes. I am aware that any	y false info .155, F.S.	ormation	1
		nted name of signee		-		

ì

Page 1

## <u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "OUTDOOR TEAMWORKS, 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 NINETEENTH DAY OF DECEMBER, A.D. 2016.

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

Authentication: 203540064

Date: 12-19-16

6106717 8300 SR# 20167146964