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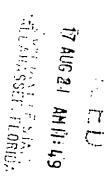
(Re	questor's Name)	·				
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COVER LETTER

	distration Section islon of Corporation			
SUBJECT:	Kick	Power Name of	Sports	: LC.
	9	Name of	Limited Liability Com	pany
				to Transact Business in Florida," Certificate of liability company to transact business in Florida
Please return	all correspondence of	concerning this matter to the	e following:	
		Charlie	Chi.	
		N	Name of Person	
		Ricky Power	er Sports	, LLC.
		<i>J</i> ' F	Firm/Company	
)/425 Com	n Ann	# 100
		2425 Camp	Address	η /00 ·
		1		
		Carrollton Cityl	Texas	75006
		OK,	state and hip code	
	<i>K</i>	LCKY POWERS F E-mail address: (to be use	ORTS @ GMA ed for future annual rep	ort notification)
For further in	nformation concernin	g this matter, please call:		
	Luca Name o	S Hao of Contact Person	at (<u>972</u>)_ Area Code	242 - 1143. Daytime Telephone Number
Div Reg P.O	AILING ADDRESS: ision of Corporations gistration Section b. Box 6327 lahassee, FL 32314		Di Re Cli 26	REET ADDRESS: vision of Corporations gistration Section ifton Building 61 Executive Center Circle Ilahassee, FL 32301
	a check for the follow \$125.00 Filing Fee	ing amount: \$\Boxed{\subset} \$\$\$\$\$\$\$\$\$\$\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing For Certified Copy	ee & \$\Bigsim \$160.00\$ Filing Fee, Certificate of Status & Certified 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 HABILITY

COMPANY TO TRANSACT BUSINE	ESS IN THE STATE OF FLORIDA:					
1. Ricky Power (Name of Foreign Limit	ted Liability Company: must include "Lim	ited Liability Company," "L.L.C.," or "LLC	2.")			
(If sums unavailable, enter ulternate name a	denied for the name of trans acting business in	Florida. The alternate name must include "Limited	Lishibry Company 7 of L C of or of L C or			
	TEXAS company is organized)	0 0/				
4 <i>N/A</i> ·	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905; F.S. to deter	to registration.)				
_			/1			
5. 2425 Comp (Street Address of Vrincip	/1 ve ., # 100 val Office)	6. 2425 Came) /1 mg., # 100			
Carro ilton	TX 75006	6. 2425 Came (Mailing) Carrollton	, TX 75006.			
******	Florida registered agent: (P.O. Bo					
Name:	Extrance Meter	Jares Mc.				
Office Address:	2327 E. Semona	-M Blud.	S-1.			
•	Anaka	, Florida	703 🖺 🛪			
		, 1 101 tda(Zip	code)			
Registered agent's acceptant		f process for the above stated limit	sed liability company of the place			
			ict in this capacity. I further agree			
		er and complete performance of m	y duties, and I am familiar with			
ana accept the obligations of	my position as registered agent.	÷ /				
	(Registered agent	l-(👸 t 9			
		-	a.P			
8. The name, title or capacity <u>Title or Capacity:</u>	and address of the person(s) who Name and Address:	has/have authority to manage is/are <u>Title or Capacity:</u>	:: Name and Address:			
_CEO	Charlie Chi	_ Owner	_Si Sur			
	2425 Camp Are. # 1 Correllton TX 750	100 06	CANCILIEN. 17X 75006			
(Use attachments if necessary)					
	thich it is organized. (If the certific	d, duly authenticated by the official cate is in a foreign language, a trans				
10.771		MAD (1) (1) (2) (1) (2)				
		(1) (b), Florida Statutes, I am av third degreg)felony as provided for				
			•			
	Signal	ure of an authorized person				
	Marlie Charlis	- Chis				
Typed or printed name of signee						



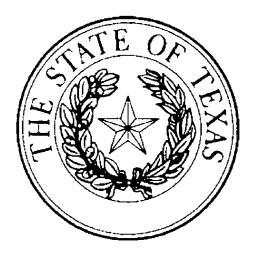
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Ricky Power Sports, LLC (file number 801881454), a Domestic Limited Liability Company (LLC), was filed in this office on November 12, 2013.

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 August 07, 2017.



Phone: (512) 463-5555



Rolando B. Pablos Secretary of State

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services