12122023573 From: Kimberly Laughrey

10/25/2017

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Division of Corporations

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (512)418-6949

: (954)208-0845 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** 🖓

Email Address:_

Foreign Limited Liability Company National Xhall League LLC

Certificate of Status	0
Certified Copy	0
l'age Count	04
Estimated Charge	\$125.00

Ñ

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Help

1/26/17

cover letter 2

	Registration Section Division of Corporations				
	NationalXballLeagueLLC				
UBJEC	T: Name of Li	mited Linbility Co	mpany		
he enclo xistence	used "Application by Foreign Limited Liability Compa , and check are submitted to register the above referen	ny for Authorizatic ced foreign limited	on to Transact Business in Florida," Certif Hiability company to transact business in		
lease ret	turn all correspondence concerning this matter to the fo	ollowing:			
	MichaelMadewell				
	Nar	ne of Person			
	National X ball League LLC				
	Firm/Company				
	12EastChurchSt				
	Address				
	Aurora,MO65605	• *			
	City/Ste	ate and Zip Code			
	michaelm@ozarksbusinessservices.com				
	E-mail address: (to be used	for future annual r	eport notification)		
or furth	er information concerning this matter, please call:				
	MichaelMadewell	/	440-4405		
	Name of Contact Person	Area Code	Daytime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassec, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed	d is a check for the following amount: ■ \$125,00 Filing Fee □ \$130,00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	g Fee & S160.00 Filing Fee, Certified Copy		

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

IN COMPLIANCE WITH SECT COMPANY TO TRANSACT BES	ION 605.0902. FLORIDA STATUTES, THE FOL INESS IN THE STATE OF FLORIDA:	LOWING IS SUBMITTED TO REGISTE	RAFOREICN LIMITED LABILITY				
1 NationalXballLeaguel	LC						
(Name of Foreign)	imited Unbility Company; must include "Limited	Elability Company," "L. L.C.," or "L.L.C.")					
ne de la	me adopted for the purpose of transacting business in Flori	ids. The alternate mane must include "Limited List	sility Company," "L.L.C," or "LLC.")				
	inc anopten for the purpose of damage may be seen						
2. Delaware Quandicion under the law of wh	ich föreign limited liability company is organized)	5. (FEI manb	er, if applicable)				
4 10/24/2017							
(Dute first transacted husiness in Florida, if prior to registration.) (See sections 605 0904, 2, 605 0905, F.S. to determine penalty flability)							
5 12 East Church St	<u>.</u>	6. 12 East Church St (Mailing Add)					
(Sirret Askhas of P	meipal Office)	Aurora, MO 65605	(44)				
Aurora, MO 65605			<u>-</u>				
			<u>一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一一</u>				
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	_001_				
Name:	CTCorporationSystem		25 SSE 25				
•	1200 SouthPinelslandRoad						
Office Address:		12204					
	Plantation (City)	Florida 33324 (Zip cod	8: 0 13:15 10:10 10:10				
Registered agent's accep							
	The second second and a second	process for the above stated limited	l liubility company at the place				
, ,, ,, ,,	gisterea agent and to accept service of p tion, I hereby accept the appointment a tions of all statutes relative to the proper	e roompren normi ama avree in aci	THE THE CHIPMENTS. L. PORTING, T.S. C.				
to comply with the provis-	ions of an statutes retaine to the propers s of my position as registered agent.	1 On the second	n - Assi Secretary				
unn accept in mangaran	By: CTCorporationSystem	Jenniter Quin	n - Assi accidity				
	(Registered agent)	agricure)					
	Cab a communication by	o. thous outbority to propage is/are.					
8. The name, title or cap <u>Title or Capacity:</u>	acity and address of the person(s) who have and Address:	Title or Capacity:	Name and Address:				
	·	Member	Swooping Bird J.I.C				
Member	TAZ Holding USA Inc. 12EastChurchSt	- Stemoor	12EastChurchSt				
	Augora, MO65605		Aurora, MO65605				
	_		Thuman Cala				
Member	Tippmann Holdco US Inc.	Manager	Thomas Cole 12EastChurchSt				
	12EastChurchSt Aurora, MO65605		Aurora, MO65605				
		_					
(Use attachments if neces							
9. Attached is a certificate	e of existence, no more than 90 days old,	duly authenticated by the official h	aving custody of records in the				
of the translator must be							
10. This document is executed submitted in a document	cuted in accordance with section 605.020 to the Department of State constitutes a th	3 (1) (b), Florida Statutes, I am awa aird degree blony as provided for it	re that any false information is.817.155, F.S.				
$\mathcal{S} : \mathcal{I} = \mathcal{I}$							
Signature of an authorized person							
	·						
	ThomasCole-Manager	or printed name of signee	_ 				
tostames							

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "NATIONAL XBALL LEAGUE 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 TWENTY-THIRD DAY OF OCTOBER, A.D. 2017.

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

56.



5716853 8300

SR# 20176735609

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

Juffrey W. Bullack, Sacretary of State

Authentication: 203440954

Date: 10-23-17