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11/9/1895

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 476802 7186304

AUTHORIZATION : THE BEAR

COST LIMIT : \$ 425-00

ORDER DATE: November 8, 2018

ORDER TIME : 2:22 PM

ORDER NO. : 476802-005

CUSTOMER NO: 7186304

### FOREIGN FILINGS

	NAME:	CONCEPTS	INTERNATIONA	L LLC		AGN 81.32	-77	
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CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

### COVER LETTER

TO:		stration Section sion of Corporati	ons						
SUBJI		Concepts Internati	ional LLC						
SUBJI	sci; _	<del> </del>	Name of	Lunited Liability	Company				
			oreign Limited Liability Com ted to register the above refer						
Please	retum s	all correspondence	concerning this matter to the	following:					
		Sara Rawson,	, Global Subsidiaries						
			N	lame of Person			•	_	
		Amazon							•
			F	irm/Company				_	:
		410 Terry Av	e. North						,
				Address				- :	
		Scattle, WAS	98109					<b>~</b>	
			City/S	State and Zip Code	;			_	
		globalsubs-csc	_				-	***	المحدث مصد
			E-mail address: (to be use	d for future annua	l report not	ification)			1 ]
For fur	ther inf	formation concern	ing this matter, please call:					CO	1
	Sara	Rawson, Global S	Subsidiaries	206 at (	266-100	00		Ū	; i f
		Name	of Contact Person	Area Code	Day	time Telephone	Number	<u>ب</u> ب 	
	Divis Regis P.O.	LING ADDRESS sion of Corporation stration Section Box 6327 shassee, FL 32314			Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center C ee, FL 32301		J	
Enclos		check for the follo 25.00 Filing Fee	wing amount:  \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	_	□ \$160.00 Fi			ate

### 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:

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  Title or Capacity:  Manager  Arun Rajan  Manager  Tark Hassan  400 E. Stewart Ave. Las Vegas, NV 89101  Manager  Tark Hassan  400 E. Stewart Ave. Las Vegas, NV 89101  (Use attachments if necessary)  9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)  10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 s.817.155, F.S.	1. Concepts International (Name of Foreign	LLC Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.," or "LIC.	<u>')</u>
Arms and arrest address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Corporation Service Company  Office Address:  Tallahussee  (Copy)  Registered agent's acceptance:  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 application, the provision of all statutes relative to the proper and complete performance of my duries, and familiar with and accept the obligations of my position as registered agent away to manage is/are:  Title or Capacity:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Name and Address:  Ti	(If name imagnitable enter alternate r	name adopted for the purpose of transacting business in Flor	rida. The alternate name must include "Limited L.	iability Compony," "L.L.C." or "LL.C.")
(PEI number, I applicable)  11/1/2018  (Dits five insurated blasses in Florida, of price to registanton) (See vectors 60:000 A 603 000; 1.5 to determine protify links))  5. 400 E. Stewart Ave. (Struct Addition of Throught Office) (Las Vegas, NV 89101  Corporation Service Company  Office Address:  Tallahassee (Cosy)				
(Since Address of Florida tegistered agent: (P.O. Box NOT acceptable)  Name: Corporation Service Company Office Address:  1201 Hays Street  Tallahassee Florida to comply with the provisions of all statutes relative to the proper and complete performance of my darks, and I am familiar with Corporation Service Company  Registered agent and receptance:  Having been named as registered agent and ro accept service of process for the above stated limited limbility company at the place designated in this application. 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 relative to the proper and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and address of the appointment as registered agent and agree to act in this capacity? I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and complete performance of my darks, and I am familiar with Corporation Service Company  By:  (Registered agent and to accordance with seven and complete performance of the continuation of the certificate under onth of the translation of the certificate is in a foreign language, a		thich foreign limited hability company is organized)	3. (FEI mu	nher, if applicable)
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5. 400 E. Stewart Ave.    Content Address of Florida registered agent: (P.O. Box NOT acceptable)   Las Vegas, NV 89101	4. 1111/2010	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905 F.S. to determine	registration)	<del></del>
Las Vegas, NV 89101  Las Vegas, NV 89101  Las Vegas, NV 89101  Las Vegas, NV 89101  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Corporation Service Company  1201 Hays Street  Tallahassee  Florida 32301  (Appeable)  Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stude limited limited limited limited accepts generated estignated in this application, I hereby accept the appointment as registered agent and agree to uct in this capacity? I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my datics, and I am familiar with and accept the obligations of my position as registered agent.  Corporation Suffice Company  Asst. Vice President:  Corporation Suffice Company  Asst. Vice President:  Corporation Suffice Company  Asst. Vice Resident:  Corpo	= 400 E. Stewart Ave	(		
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Corporation Service Company  1201 Hays Street  Tallahassee Florida 32301  Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above studied liability company at the place designated in this application. 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 relative to the proper and complete performance of my datics, and I am familiar with and accept the obligations of my powition as registered agent.  Corporation Suffice Company  Service Registered agent's vigostates.  Corporation Suffice Company  Asst. Vice Resident  Registered agent and agree to act in this capacity? I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my datics, and I am familiar with Acceptate agent and accept the obligations of my powition as registered agent.  Corporation Suffice Company  Asst. Vice Resident  Registered agent and address of the person(s) who has/have authority to manage is/are:  Title or Capacity:  Name and Address:  Title or Capacity:  Name and Address:  Title or Capacity:  Name and Address:  Nam		Principal Office)	O. (Mailing Ac	dress)
Name:  Office Address:    1201 Hays Street   Tallahassee   Florida   32301	Las Vegas, NV 89101		Las Vegas, NV 89101	<del></del>
Name:  Office Address:    1201 Hays Street   Tallahassee   Florida   32301				<del></del> · :
Office Address: 1201 Hays Street  Tallahussee	7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	. 1
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Manager   Arun Rajan   Manager   Scott Schaefer	and accept the obligation	Corporation Service Company  By:	Signature)	·~·
400 E. Stewart Ave. Las Vegas, NV 89101  Manager  Tarek Hassan  400 E. Stewart Ave. Las Vegas, NV 89101  (Use attachments if necessary)  9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)  10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 s.817.155, F.S.  Signature of an authorized person	•			
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Manager  Tarek Hassan  400 E. Stewart Ave.  Las Vegas, NV 89101  (Use attachments if necessary)  9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)  10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 s.817.155, F.S.  Signature of an authorized person				100 12 01 - 1
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# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

### November 5, 2018

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### CONCEPTS INTERNATIONAL LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on October 2, 2014.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

l also certify that the names of all managers listed in the most recent filing are: TAREK HASSAN, ARUN RAJAN, SCOTT SCHAEFER

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: TAREK HASSAN, ARUN RAJAN, SCOTT SCHAEFER

The names of all persons authorized to act with respect to real property listed in the most recent filing are: SCOTT SCHAEFER, ARUN RAJAN



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Vien Newin Galetin