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Division of Corporations

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Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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 I-PEX USA LLC Certificate of Status 0 Certified Copy 04 Page Count

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

| | SINESS IN THE STATE OF FLORIDA: | | E 1 C/C/1/2/14 II 2 I 1442 | IO REGIO | TER A | FOREIGN L | IMITED LIAB |
|---|---|----------------|----------------------------|--------------|-----------|-------------------------------|-----------------|
| 1-PEX USA LLC | | | | | | | |
| (Name of Foreign I. | imited Liability Company; must include "Limited" | Liability Co | mpany, ""L.L.C. | ." oi "LLC." | ') | | . |
| PEX USA DSK LLC | | | | | | | |
| name unavailable, enter alternate na | me adopted for the purpose of transacting husiness in Flor | sáa. The alter | rate namic must inc | lude "Limned | Liability | Company," L.1 | C, or TLEC'h |
| Texas | | 3 | 20 - | 151 | 14. | 47 | |
| (Janual allows trader the law of wh | ich foreign limited lubility company is organized) | | | (FEI que | nber, i∫a | pplicatils) | |
| | (Date this transacted business in Florida, if pelor to re (See sections 505 0504 & 605 0505; F.S. to determine | gostration) | lnv) | | | - | |
| 2305 Donley Drive, Sui | itc 110 | | 05 Donley Dr | ive, Suite | 110 | | |
| reet Address of Principal Office) | | 0 | (Mailing Addres | 5) | | | |
| Austin, Texas 78758 | | Au | stin, Texas 7 | 3758 | | | |
| Name: | C T Corporation System | | | | | (2) (5) | 7. 7 |
| Office Address: | 1200 South Pine Island Road | | | | | 1-1-1-1 1-1-1-1 1-1-1-1 | ; ; ; ; } |
| | Plantation | | , Florida | 33324 | , | 8 | , |
| | (Cay) | | | (Zip code) | | رب) تق | |
| | istered agent and to accept service of pr ion, I hereby accept the appointment as | registered | l agent and a | gree to ac | t in thi | s capacity. | I further a |
| comply with the provision | ons of all statutes relative to the proper a of my position as registered agent. | | | , | пинез | | , amanar ma |
| comply with the provision and accept the obligations | of my position as registered agent C T Corporation System | | | • | natres | • | , |
| comply with the provisio | of my position as registered agent C T Corporation System | 全 文 | , > | | | - | , 2 |

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

| Title or Capacity: | Name and Address: | Title or Capacity: | Name and Address: |
|--------------------|---------------------------------------|--------------------|---------------------------------------|
| □Manager | Name: I-PEX Inc. | | Name: Tamaki Uchida |
| ☑ Member | Address: 12-4 Negoro Momoyama-cho | □Member | Address: 2305 Donley Drive, Suite 110 |
| □Authorized | Fushimi-ku, Kyoto-city 612-8024 Japan | □Authorized | Austin, Texas 78758 |
| Person | | Person | |
| Other | LIOther | []Other | |
| দ্যিManager | Name:Takaharu Tsuchiyama | □Manager | Name: |
| □Member | Address: 12-4 Negoro Momoyama-cho | □Member | Address: |
| □ Authorized | Fushimi-ku, Kyoto-city 612-8024 Japan | □ Authorized | |
| Person | | Person | |
| □Other | Other | □Other | Other |
| □Manager | Name: | □Манадел | Name: |
| □Member | Address: | ∏Member | Address: |
| □Authorized | | L']Authorized | |
| Person | | Person | |
| Other | ElOther | □Other | E)Other |
| | | | |

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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 outh 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.

| 2-2- | | | | | |
|---------------|-----------------------------------|--|--|--|--|
| | Signature of an authorized person | | | | |
| Tamaki Uchida | | | | | |
| | Typed or printed rame of signee | | | | |

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



Ruth R. Hughs Secretary of State

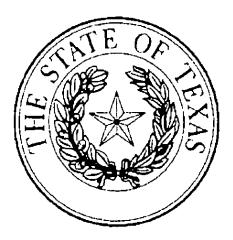
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for I-PEX USA LLC (file number 800379173), a Domestic Limited Liability Company (LLC), was filed in this office on August 19, 2004.

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 10, 2020.



Ruth R. Hughs Secretary of State

Phone: (512) 463-5555 Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services
Prepared by: SOS-WEB TID: 10264 Document: 988698740008