

P 15000039928

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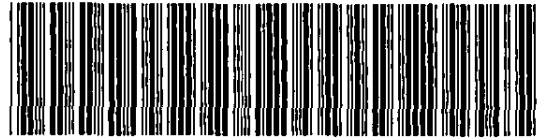
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

5/5/15

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DATE: 5/4/15

NAME: HC SPORT HORSES U.S. INC.

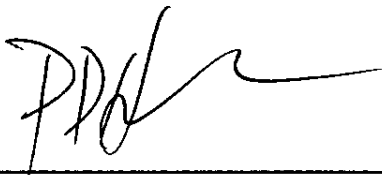
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AUTHORIZATION: ABBIE/PAUL HODGE



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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: HC Sport Horses U.S. Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Maureen Willis

Name (Printed or typed)

10866 Wilshire Blvd., Suite 650

Address

Los Angeles, CA 90024

City, State & Zip

424.273.1172

Daytime Telephone number

patrick@thomasstjohn.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be: HC Sport Horses U.S. Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10866 Wilshire Blvd., Suite 650

Los Angeles, CA 90024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Upkeep and training of horses.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tamara Czartoryski (CEO/Director)

Name and Title: _____

Address 10866 Wilshire Blvd., Suite 650

Address: _____

Los Angeles, CA 90024

Name and Title: Thomas St. John (Secretary)

Name and Title: _____

Address 10866 Wilshire Blvd., Suite 650

Address: _____

Los Angeles, CA 90024

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Paracorp Incorporated
Address: 155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Maureen Willis
Address: 10866 Wilshire Blvd., Suite 650
Los Angeles, CA 90024

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TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

See Attachment

Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator

4/30/15

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 05/01/2015

ENTITY NAME: HC Sport Horses U.S. Inc.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Sharon Cook

Sharon Cook, Assistant Secretary
Paracorp Incorporated